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The Nutrition Club Approach: Community Mobilization to Prevent Child Malnutrition

Mr. NUGYEN, Anh Vu ¹

¹ *World Vision Vietnam*

Corresponding Author: catherine_johnston@wvi.org

Objective: To establish a scalable and sustainable, community led approach to prevent and manage child malnutrition, and increase vulnerable families' access to food security.

Methods: The establishment of the nutrition club is a participatory community mobilization process involving local leaders including the Women's Union, Farmers Union and Youth Union, local health workers and caregivers of young children. The first step in the process is the formation of district and commune management boards and community development boards. This is followed by a training needs assessment and capacity strengthening of local partners. Nutrition club facilitators are selected by the community and are widely respected and committed to community service. Monthly nutrition club meetings are attended by pregnant women and caregivers of children under five years old. Activities during the nutrition club meeting includes: care and nutrition during pregnancy and the post partum period, complementary feeding, child care practices, development of home gardens and hygiene and sanitation; using interactive facilitation methods such as games, skills practice, role plays and competitions. Follow up home visits are conducted to reinforce positive practices and support vulnerable families. Caregivers who attend the nutrition club have access to community led interest groups such as: chicken raising, livelihoods, agriculture and micro- credit schemes. Nutrition club members pay a small monthly fee that covers cost of refreshments and utilities. Monitoring and supervision is conducted by a team of government district and health center staff.

Sustainability of the approach is promoted by mobilizing and utilizing existing resources. An agreement is made between the community development board and World Vision that support for running 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. During scale up of the approach to new districts site visits to established nutrition clubs provide a valuable learning experience. Advocacy activities are conducted regularly at national government level.

Results: Over a six year period the nutrition club approach has been scaled up to cover 29 of the most remote and vulnerable districts in Vietnam. A total of 521 Nutrition Clubs cover 41% of the target coverage area villages, reaching approximately 17,029 children per month. Caregivers report improved complementary feeding practices and have access to home gardens, chicken raising, livelihoods and micro credit interest groups. Caregivers also report increased support for infant and young child feeding from their household members and perceive the regular growth monitoring as important.

The government health staff report increased uptake of maternal and child health services. More than a thousand nutrition club facilitators have been trained and 521 village development boards have increased capacity. Commune and district health staff have increased capacity for facilitating and monitoring nutrition interventions. The oldest established nutrition clubs demonstrate that the approach can be sustained using local resources. In addition The National Institute of Nutrition has committed to scale up the approach to non-World Vision Vietnam areas.