Author: Leburu Manana

Co Author: B. Nkosi

Topic: Community health and nutrition programmes and interventions

Title: Community based delivery of early childhood nutrition and development in a rural district, Northern Cape Province: opportunities based on intersectoral collaboration.

Presentation Type: Oral

Background

The Northern Cape Province has one of the highest child malnutrition rates in South Africa. Although there is a shift in involving community based delivery of nutrition services, the framework for the coordination between government and community based delivery is limited or non-existent at times. This paper describes the intersectoral approach by CHW’s in providing child malnutrition interventions in John Taolo Gaetsewe (JTG) District, Northern Cape Province.

Aim & objective:

The aim of this paper is to describe interventions and investment in intersectoral approach to promote early childhood nutrition and development; through monitoring by use of Road to Health Booklet, referral to other sectors for preventive and promotive service delivery.

Methodology

The CBOs are contracted by PATH-Window of Opportunity Project (WinOP), an NGO aimed at strengthening health systems and community structures in provision of MCHN interventions during pregnancy and the first 1000 days of children’s lives. CHW have gained skills through trainings conducted by PATH mentors and practice to render early childhood services to the community. One skill they have gained is monitoring of nutritional status in children through Mid-Upper Arm Circumference measurement, reading and interpretation of the graph in the Road to Health Booklet. Combination of the MUAC and RTHB results determines service intervention required by the child.

Results

CHWs refer clients to different sectors as determined by the need for service delivery. Tension in the relationships between health care workers and community health care workers as cases are identified in the community. The interreferral system is in place that gives access to CHWs to refer to different sectors for specific service delivery as required by the client. In spite of the referral system in place, compliance is questionable as referral feedback is compromised and this results in compromising continuum of service delivery.
Conclusion

At the community level, there is a need for continued community mobilization and education on different service delivery sectors, ways and approaches to access delivery points. There is also a need for stronger coordination between government sectors and community based delivery. Government has a wealth of systems that can be used to promote wellbeing and welfare of communities, communication and streamlining of systems is of vital importance.