

Improved Maternal, Infant and Child Nutrition in Rural Tajikistan (MICN) Project

Background

Despite improvements in food security in the past years, only 24% of Tajikistan's rural population is food secure (WFP, 2018). Malnutrition has remained a significant public health problem as further improvement stagnated during recent years due to the weak economic conditions and the uncertain income situation because of fluctuating remittances.

Almost one third of the Tajik population suffers from malnutrition. There is a lack of adequate quality and quantity of food, basic hygiene, clean drinking water and health care. Women of reproductive age, infants and young children are particularly affected.

To ameliorate the situation, donors have launched programmes to improve nutrition of children and mothers. To achieve a holistic approach, all relevant stakeholders, such as the government, donors, development partners and communities around the national nutrition goal have been unified in a multisectoral platform. To coordinate this scale up Tajikistan joined the "Scaling up Nutrition" (SUN) Initiative in 2013 and has established a SUN multisectoral platform in 2014. This initiative is a movement, led by countries, committed to the understanding that good nutrition is the best investment of the future. The political leaders of SUN countries agree to engage all sectors of central and local governments in efforts to improve nutrition.

Objective

The objective of the project is to improve the nutritional situation of women of reproductive age, infants and young children in the project region. The political partner is the Ministry of Health and Social Protection of the Population (MoHSPP) of Tajikistan. The project is being implemented in three districts of Khatlon Oblast, namely Temurmalik, Khovaling and Baljovon and cooperates with the KfW (Kreditanstalt für Wiederaufbau) supported hospitals and schools in the same districts.

Activities are divided into two main areas:

- A) Improved nutrition related services, e.g. the integration of the identification of malnourished children through relevant measurement techniques and ensure the enrolment into programmes like therapeutic feeding carried out by health workers; and
- B) Strengthening multi-sectoral cooperation by organising the Multi Sector Coordination Council meetings on a quarterly basis.

Project name	Improved Maternal, Infant and Child Nutrition in Rural Tajikistan (MICN)
Commissioned by	Federal Ministry of Economic Cooperation and Development Germany (BMZ)
Project region	Districts of Temurmalik, Khovaling and Baljovon in Khatlon region of Khatlon Oblast
Lead executing agency	Ministry of Health and Social Protection of the Population (MoHSPP) of Tajikistan
Duration	October 2016 – November 2019 The extension of the project till 2022 is under revision

Organisational Structures

The MICN project works at multiple levels:

- At grassroots level by supporting households in diversifying their daily diet to reduce malnutrition in children and infants;
- At the level of Primary Health Care Facilities (Medical Houses and Medical Centers) by training Family Medicine Staff (nurses and doctors) on nutrition topics;
- At community level, a Development Worker promotes the behaviour change in the field of hygiene and nutrition as well as the monitoring of outputs, outcomes and impact of training modules;



Left: Global Hand Washing Day

Middle: Information event on breastfeeding

Right: Mother and child taste new recipes

- At national level by coordinating important aspects related to nutrition security, such as the development of the Common Results Framework (CRF) to improve nutrition through organizing related working groups with the support of the SUN Secretariat (based in the MoHSPP).

Our Activities

- Counselling in nutrition and basic hygiene;
- Provision of advisory service related to nutrition and basic-hygiene in selected health institutions;
- Household ranking to identify food insecure households;
- Develop and launch awareness raising campaigns on nutrition and WASH (water, sanitation and hygiene interventions);
- Support the registration of neighbourhood committees, called mahalla committees (MC);
- Development of Training of Trainers (ToT) module for Primary Health Care (PHC) staff;
- To strengthen the capacity of newly-formed MCs, a one-day training on committee management was conducted;
- Elaboration and dissemination of information materials on nutrition, health and basic hygiene.

Our Achievements

- Counselling in nutrition and basic hygiene in selected villages has been established at school level;
- 20 cooking demonstrations for 515 Community Nutrition Volunteers (CNVs) and proactive women have been conducted;
- A household ranking has been conducted to identify food insecure households and reasons for malnutrition. Up to 80% of population have participated and 90 social mentors identified to share farming experience with food insecure households;
- 4,882 copies of informational materials on nutrition, health and basic hygiene have been published and distributed;

- A Global Hand Washing Day was organised in three schools with the support of the KfW, covering more than 318 school children (131 female, 187 male) and teachers;
- Awareness raising campaigns on nutrition and the hygienic preparation of food have been conducted by CNV among 15,115 people (12,257 female, 2,858 male);
- Existing MC have been re-registered at village level and further MCs in the villages of Salmolidasht, Shaghmon and Chorbogh (Baljuvon district) have been established. Furthermore, capacity development trainings on committee management have been delivered to MCs;
- 60 CNVs have been selected during MC meetings, attended by 60-70% of the community and each CNV was assigned to at least 50 households;
- A Training of Trainers (ToT) module for CNVs has been developed and delivered to the representatives of the Healthy Lifestyle Center (HLSC), Regional Family Medicine Training Centre (RFMTC), Sanitary Epidemiology Center, district field officers (DFO), local authorities and to the Mountain Societies Development Support Programme (MSDSP);
- CNVs have been equipped with log-books, basic stationary and required guidelines, and have initiated activities in close collaboration with MCs and health workers; training modules for CNV have been augmented with information from additional resources and international best practices.

Benefits

Almost one third of the Tajik population suffers from malnutrition. There is a lack of adequate quality and quantity of food, basic hygiene, clean drinking water as well as adequate health care. Women of reproductive age, infants and young children are particularly affected by food security and nutrition status of an infant reveals much about the history to date and tells us much about the forward trajectory through life. And this status is determined in large part by the health and nutrition status of the mother. Thus, the focus of the project is to improve the nutritional situation of women of reproductive age, infants and young children in the Kathlon Oblast.

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