

**Organization for Promotion of Health and Community
Development (OPHCD)**
مؤسسة تعزيز الصحة و تنمية المجتمع

Project Brief Reports
2022 – 2025

هذه الوثيقة بتقديم تقارير موجزة عن المشاريع نفذتها مؤسسة تعزيز الصحة و تنمية المجتمع خلال فترة الاعتماد السابق

This document presenting brief reports of the projects OPHCD implemented during the previous certification/accreditation period



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Acronyms:

AMNEAB	Afghanistan Midwifery and Nursing Education Accreditation Board
CBE	Community Based Education
CBHC	Community Based Health Care
CBNI	Community Based Nutrition Intervention
CBNP	Community based Nutrition Program
CHW	Community Health Worker
CME	Community Midwifery Education
CMS	Community mobilization session
CV	Community volunteers
C-WIFS	Community weekly iron folic acid supplementation
DHIS2	District Health Information System version 2
EBS	Event-Based Surveillance
GMP	Growth Monitoring Program
HF	Health Facility
HMIS	Health Management Information System
HNO	Humanitarian Need Overview
HP	Health post
HRP	Humanitarian Response Plan
IEC	Information Education and Communication
IFA	Iron Folic Acid
IMNCI	Integrated Management of Neonatal and Childhood Illnesses
IYCF	Infant and Young Child Feeding
KI	Key Informants
MAM	Moderate acute malnutrition
MHT	Mobile Health Teams
MIYCN	Maternal Infant Young Child nutrition
MNP	Micronutrient supplementation powder
OPD	Outpatient Department
OPHCD	Organization for promotion of health and community development
PHC	Primary Healthcare
PLW	Pregnant and Lactating Women
QRCS	Qatar Red Crescent Society
RMNCH	Reproductive, Maternal, newborn and child health
RUSF	Ready for Use supplementary food
RUTF	Ready for use therapeutic Food
SAM	Severe acute malnutrition
SDP	Service Delivery Point
SRHR	Sexual and Reproductive Health and Rights
SRI	Strengthen Routine Immunization
TNA	Training Needs Assessment
TOR	Terms of Reference
TOT	Training of Trainers
TSFP	Targeted Supplementary Feeding Program

1. COMMUNITY MIDWIFERY TRAINING PROGRAM

Project title: Two years Community Midwifery training program for 24 female students selected from hard to reach and isolated areas of 8 provinces of Afghanistan

Project timeline: October-2020 — March 2023

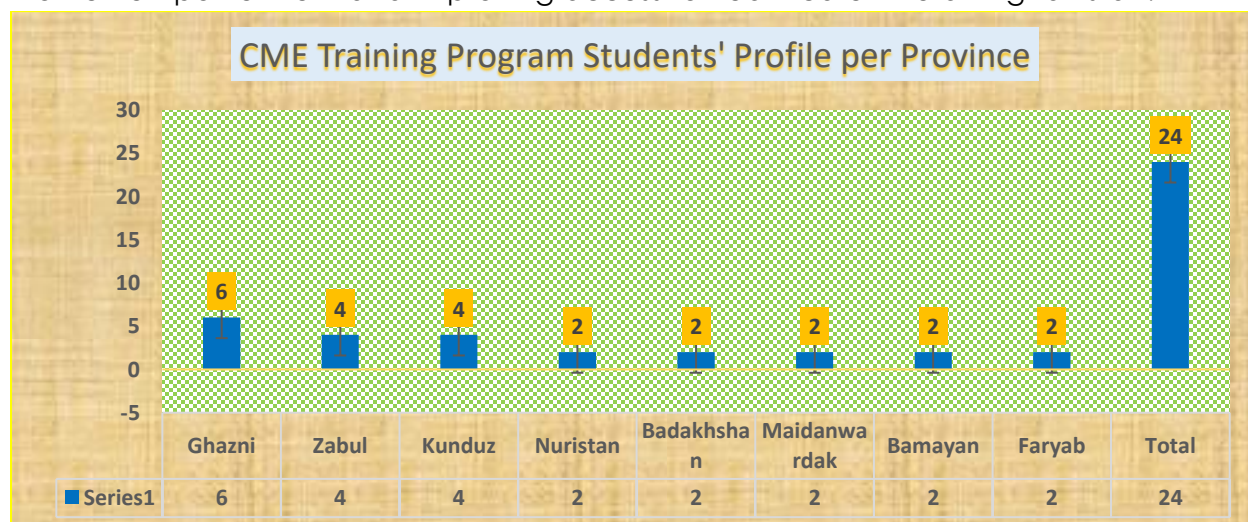
Funding agency: Qatar Red Crescent Society (QRCS)

Budget: 338,690 US \$

Project Overview: A two-year program for community midwifery training was approved by the Qatar Red Crescent Society (QRCS) to contribute in reducing maternal and child mortality that shows still high despite achievements in reduction of MMR over the last two decades in Afghanistan.

Project Scope: OPHCD with its well-qualified and technical expertise was the technical sub partner for the implementation of this project and conducted the required assessments in eight targeted provinces for finding eligible students in relevant communities, applying the criteria for selection of CMEs particularly in underserved and hard to reach areas with due consideration of mobile health teams' functionality with no female staff as well as ensuring their stay in relevant communities after completion of the program, coordinating with partners mainly national hospitals to ensure undertaking quality clinical work by CME students and communities and religious leaders, conducting internal and external assessments for accreditation of the schools and final evaluation.

Project results: Despite the unpredictable challenges (see below) the project completed successfully and all the graduates achieved above 70% marks. The schools got the highest scores (98%) in the external assessment of accreditation by Afghanistan Midwifery and Nursing Education Accreditation Board (AMNEAB) and the graduates are being deployed in relevant health facilities in their respective communities following their graduation. The results of this program has been regarded as a great success towards women empowerment and improving access to healthcare in rural Afghanistan.



Lessons learnt:

Rapid escalation of war and political upheaval, abrupt takeover of cities by Taliban on August 15, 2021 causing close up of offices, equivocal instructions on women education and work, disrupted banking system for few days followed by strict limitations on money withdrawal from bank accounts, third wave of COVID19 during April—August 2021, has further exacerbated the situation in terms of management of the training program, implementation of quarantine rules and high turnover of staff mostly due to abovementioned reasons. However, the support of donor agency and the prime contractor was vital that assisted the OPHCD to overcome the problems and implement the project successfully within the agreed timeframe.



2. HEALTH CAMPS PROJECT IN KANDAHAR CITY

Project Title: Health Camps Project to strengthen the Immunization, Nutrition and MNCH services in the poor urban areas of Kandahar city

Project timeline: Oct 2023 – December 2026

Funding agency: UNICEF

Budget: 2554829

Project Overview: Around one third of the population in Afghanistan are not able to access critical lifesaving healthcare (Health cluster, 2024). 40% of southern region consistently miss polio vaccinations during campaigns (38 out of 56 of the wild poliovirus cases reported in southern Afghanistan). The coverage of 3rd dose of Penta is 29.5% in Kandahar (AHS 2018). Furthermore, acute malnutrition among children and women remain above emergency threshold with an impact that 19.7 million (47%) of the country's population are in nutrition crisis. In Kandahar findings of a rapid MUAC assessment estimates 42.3% children had Global acute malnutrition of which 16.3% with severe acute malnutrition (SAM). According to results of Urban SMART survey in 2022, an estimated 11.3 percent and 44.3 percent <5 children are wasted and stunted, respectively.

To respond to the situation and stop the potential intense polio transmission, increase the coverage of routine immunization and improve the nutrition status of <5 children and PLWs, OPHCD implemented multi sectoral service delivery health camps in Kandahar city with UNICEF funds. With nutrition interventions - as an entry point- the proposed activity ensured access to a very high proportion of <5 children through health camps in which integrated PHC services including basic immunization, RMNCH, nutrition and SBC interventions are provided.

Goals and objectives: To increase access of a very high proportion of <5 missed children and PLWs to EPI/polio vaccines, nutrition, RMNCH and SBC services through establishing 6 health camps with 24 service delivery points.

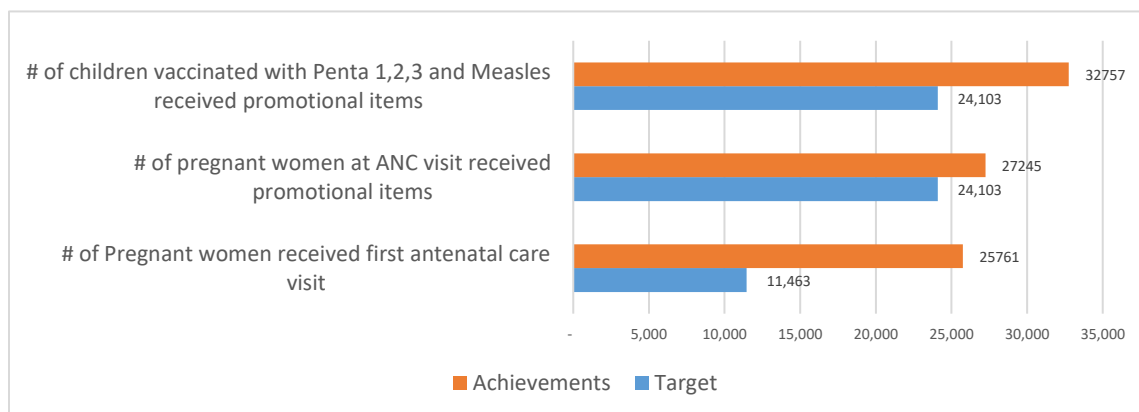
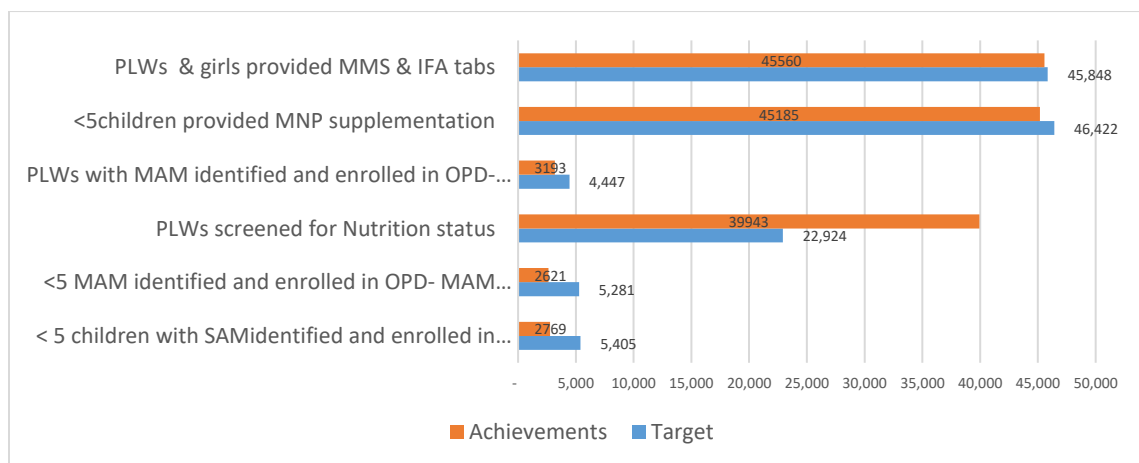
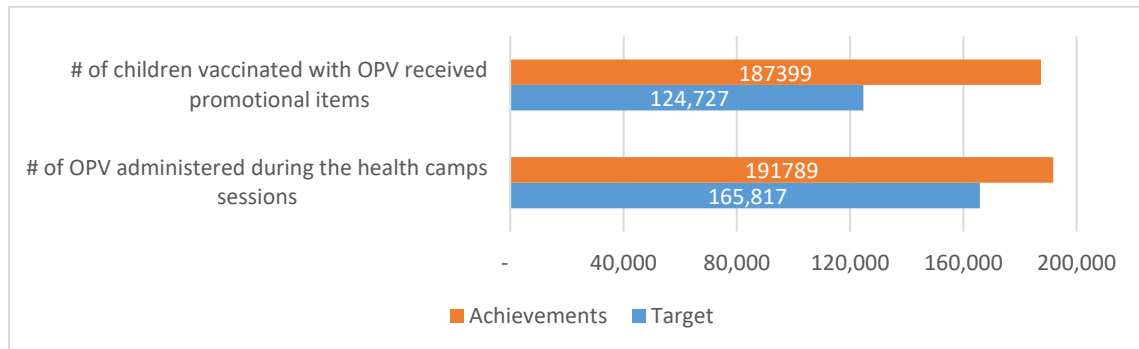
Project Scope: The project focused on different beneficiaries in different phases, the activities mainly include:

- Coordination with local partners and stakeholders including BPHS implementer for mobilizing the available CBHC/CHWs network as well avoiding duplication.
- Identifying service delivery sites/locations for these health camps in the most vulnerable informal settlements and slums of Kandahar city where the high-risk communities are living,
- Conducting trainings namely MIYCN, IMAM, Health and EPI initial/refresher, HMIS, IP SBC and IPC, MNCH, IMNCI and other BPHS recommended trainings for health camps staff and orientation for religious leaders, and community members of health camps.
- Supply of medical and non-medical equipment, medicine, medical & non-medical consumables, nutrition and vaccine supplies, IEC materials for SBC, stationery, reporting tools & other materials required for health camps.

- Healthcare service provision of integrated PHC services including basic immunization, RMNCH, nutrition and SBC interventions to the 90290 catchment area population of target locations.

Project results:

The project successfully implemented and healthcare services provision continued as per the project timeframe. The services included but not limited to OPD, MCH services including ANC, deliveries, PNC, FP and also referrals of the patients to advance care facilities. The below charts illustrates some indicators' achievement versus project targets.



3. CATARACT SURGERIES AND PROVISION OF EYE CARE SERVICES

Project Title: Conducting cataract surgeries and provision of eye care services in nine provinces of Afghanistan

Project timeline: September ,2023 to September, 2024

Funding agency: Afghan Red Crescent Society (ARCS)

Budget: 199,753

Project Overview: The project aimed to contribute in reduction of preventable blindness especially among vulnerable and marginalized groups of people living in deep rural and isolated areas and to increase the quality of health services for people suffering from cataract in Afghanistan.

Project Scope: Key activities included coordination at central and provincial levels, development and preparedness of camps, purchasing the required tools, equipment, consumable material and drugs, IEC and health education, patient screening, conducting surgeries and distribution of visual aids.

Goals and objectives: To facilitate 2,892 cataract surgeries for needy people in 9 provinces of Afghanistan and to distribute more than 2,892 lenses during the selection of cataract cases in the provinces.

Project results: A total of 20,868 patients (11,771male and 9,097 female) were physically screened in outpatient Department (117% of the target), 2,892 patients (1,404 male and 1,488 female) were physically and laboratory screened and conducted surgeries for them, which shows 99.9 % achievement of the target, 5,779 patients (3,331 male and 2,448 female) eligible beneficiaries received Eye glasses. 24,014 clients attended Health Education and Awareness session & improved their knowledge on primary eye care services (115% coverage of the target). Brochures on cataract project public awareness were developed and printed and 24,014 brochures in nine Provinces on primary eye care to clients, and community influential members were distributed.

Approved Target						Achievement						
NO	Provinces	OPD	Surgeries	Glasses Distribution	Health education and awareness	Cataract OPD		Cataract Surgeries		Glass Distribution		Health education and awareness
						Male	Female	Male	Female	Male	Female	Male/Female
1	Ghazni	17844	2892	5784	20869	1499	1413	140	196	304	352	2553
2	Zabul					1392	706	163	172	436	235	2403
3	Badghis					1310	772	165	170	439	233	2533
4	Farah					1157	1087	172	163	302	369	2727
5	Faryab					973	900	49	66	229	145	2264
6	Takhar					1923	1905	253	302	520	458	4576
7	Badkhshan					1284	1150	182	153	364	307	2969
8	Paktika					1246	429	156	115	435	109	2047
9	Helmand					987	735	120	151	302	240	1942
Sub Total		17844	2892	5784	20869	11771	9097	1400	1488	3331	2448	24014
GD Total						20868		2888		5779		24014
1	OPD achievement Against the target				117%	Figures of blindness and myopia problems based on our Screening on percentage						
2	Cataract Surgeries achievement Against the target				100%	1	Cataract average in male only					12%
3	Eye glasses Distribution achievement Against the target				99.9%	2	Cataract average in Female only					16%
4	Awareness achievement Against the target				115%	3	Eye glass D for Male					28%
						4	Eye glass D for Female					27%

Lessons learnt:

Public awareness regarding eye problems, its consequences on the health and life, need for the required health care, and from where and how to get the required eye care need serious consideration by public health authorities.



4. SUPPORTING PRIMARY EDUCATION IN CHARDARA DISTRICT

Project Title: Supporting Primary Education in Chardara district of Kunduz Province of Afghanistan

Project timeline: 15 October 2021 to 14 October 2024

Funding agency: The Infinite Foundation, Netherland

Budget: 10340 USD

Project Overview: For many of the country's children, completing primary school remains a distant dream especially in rural areas mainly because of shortage of schools or insufficient motivation to complete the education program. To contribute in improving the education situation in the targeted location OPHC undertook:

- Establishment of community-based school classes based
- Supporting primary school students with provision of stationery and notebooks.

The project aimed for a 3-years community based education program in Chardara district of Kunduz province for 20 children aged 6-9 years (10 boys and 10 girls) for a 36 Months period based on the government community based education national norms.

Goals and objectives: To increase access of the children to primary education through establishing community-based primary school classes in the isolated villages of Kunduz province.

Project Scope: The project covered an early assessment to indicate eligible students and an appropriate location for the community based classroom, recruiting a qualified teacher through an open announcement as per the OPHCD HR policy. With close coordination with community leaders, the students were selected based on pre-set criteria. The supply of books, stationery and a daily refreshment (250 ml fresh cow's milk per student) program was implemented which was greatly appreciated by the students, their families and community elders and allowed the students to stay in the community based class as well as create an opportunity to inform the community elders about the progress of students.

Project results: All 20 students completed the 3 years' community based education program. 65% of students have achieved score above 70% while 30% between 61-69% in their final exam for the subjects being taught. Following completion of the third year, all the students were officially enrolled in the government school program.

Lessons learnt:

After political upheaval in 2021, the situation became better day by day in terms of security. Public and private sectors restarted their work in areas where there was limited access to basic health and education services.



5. LOGISTICAL AND OPERATIONAL SUPPORT FOR EVENT-BASED SURVEILLANCE

Project Title: Providing logistical and operational support for the training on Event-Based Surveillance in five provinces of the country

Project timeline: July 2023 – Dec 2023

Funding agency: World Health Organization

Budget: 428173 USD

Project Overview: The EBS project is principally designed to improve the sensitivity of Afghanistan national disease surveillance and response (NDSR) system through strengthening the existing EBS component, primarily by expanding the sources of information and making it more structural and functional at community level. OPHCD was assigned to provide technical, operational & logistic support for conducting the trainings for 11,000 CHWs and Key informants on Event-Based Surveillance in five provinces (Nangarhar, Bamyan, Kandahar, Hirat, and Badakhshan) of Afghanistan.

Project Scope: The Key issues were to coordinate the project with BPHS implementers and using the community health supervisors assigned in each health facility, train the targeted 11000 CHWs and KIs. The project mainly consisted of two essential components 1) effective coordination with local partners and relevant stakeholders including the Provincial Public Health Directorate, Regional/provincial surveillances offices, and Provincial economy directorates as well as at the health facility and community levels and 2) conducting and executing the trainings with the logistical and operational support to cover the 90 districts of five provinces. Providing the training materials, printing, distribution of per diems, refreshments, pre and post-tests, supervision and monitoring to ensure quality of the trainings were maintained by OPHCD central and provincial staff through joint visits as well as careful follow up of detailed activity implementation throughout the project timeframe.

Project results:

The project completed as per the agreed timeframe and all the targeted trainees were trained successfully.

Province	No. of Participants to be Trained	Start Date of Training	End Date of Training	No. of Participants Trained
Nangarhar	2,900	30-Sep-23	19-Oct-23	2900
Kandahar	2,200	23-Sep-23	29-Oct-23	2200
Herat	3,000	30-Sep-23	07-Nov-23	300
Badakhshan	1,480	12-Sep-23	18-Oct-23	1480
Bamiyan	1,420	10-Sep-23	10-Oct-23	1420
Total	11,000			11000



6. COMMUNITY BASED NUTRITION PROGRAM IN URUZGAN

Project Title: Implementation of Community Based Nutrition Program (CBNP) in Urozgan Province

Project timeline: August 2023 -Aug 2025

Funding agency: UNICEF

Budget: 1,931,388

Project Overview: The project implemented CBNP in all 7 districts of Urozgan including Trinkot, the central of the province. The existing Community Based Health Care network and functional HPs in all Urozgan health facilities acted as the backbone for CBNP implementation. OPHCD used a suitable management plan, carefully designed methodology and coordinated activity planning and implementation at central, provincial and community level, all have led to successful completion of the project.

Goals and objectives: To reduce preventable deaths, illness, and disability related to malnutrition through introduction and implementation of CBNP initial and follow up phase and establishment of 9 breastfeeding corners.

Project Scope: Key activities included: Establishing a CBNP/CBHC taskforce with specific ToR, support/re-vitalizing provincial nutrition committee, conducting regular monthly and ad-hoc technical meetings of these committees, regular presence in the CBNP and provincial public health coordination meetings, selection and conducting TOTs for master trainers and project technical officers, Cascading the initial trainings to all community health supervisors in the province, conducting community mobilization sessions (CMSs), follow up of CMSs and conducting refresher trainings, supplying food demonstration sessions during CMSs at the community level and capacity building trainings for community health workers on food supplementation.

Project results: Totally 20840 community people attended 521 CMS sessions resulting to seven outputs including community level nutrition plan and nominating two volunteers in each health post. Conduct 1876 food demonstration sessions and cover 24,388 caregivers, conduct growth monitoring of 18760 under 2 years children at the community level, detect and refer 8560 under 5 years children with severe malnutrition and referrals to the HFs, provide IYCF counselling to 56,280 pregnant and lactating women in 521 HPs, distributed micro nutrient powder to 160,947 children 06-59 month through 2 semi-annual MNP campaigns (60 packs each of 1 gr provided to each child during each campaign), provided IFA tablets to 280,220 adolescent girls (10-19 years) through the quarterly C-WIFs campaign in Urozgan.

Lessons learnt: Strict rules limiting participation of women especially in CMS, CHWs & CV trainings and other phases of the project were unavoidable, to tackle this, OPHCD recruited local qualified female master trainers for facilitating CMSs and other trainings sessions as well as community level traditional and cultural norms were respected and considered carefully during all phases of project implementation.



7. SUPPORTING NOMAD MOBILE HEALTH TEAMS

Project Title: Provision of PHCs to the Nomads' population through supporting one Nomad MHT

Project timeline: July 2023 – May 2024

Funding agency: Medicine Du Monde

Budget: 92,221 USD

Project Overview: Maidan Wardak Province has a population of 990,945, including 68,129 nomads, many of whom live in hard-to-reach white areas with limited access to primary health care. The project aimed to contribute to the reduction of morbidity and mortality among vulnerable population in Maidan Wardak province through increasing access of the marginalized Nomad population to the integrated PHC and nutrition services.

Goals and objectives: To increase access of the nomadic children to integrated primary healthcare and nutrition services.

Project Scope: The original plan was for one MHT, while as per the MoPH recommendation 2 MHTs, each having 5 staff and one vehicle were established. Coordination with local stakeholders, conducting the assessments including determining the service delivery points (SDPs), local recruitments, deployment of MHT in the planned SDPs were thoroughly carried out according to the timeline. Regular supply of medicine based on the consumption rates and continuous supervision assisted the project to smoothly achieve its targets and regularly reported in the DHIS2 data reporting system.

Project results:

- 23312OPD patients including children and women examined & treated.
- 2625 pregnant mothers received ANC and 791 mothers received PNC
- 678 CBA women received family planning services,
- 1922 Pregnant mothers have received TT2+ vaccine.
- 1594 under two year children have received measles and penta3 vaccination.
- 845 women received Mental Health Counseling.
- 503 under 5-year SAM children detected, enrolled in OPD SAM and provided RUTF while
- 986 under 5-year MAM children diagnosed and enrolled in OPD MAM program and provided RUSF,
- 1206 PLWs received Super Serial and MIYCN Counseling
- 8234 under 5-year children in have provided screening
- 2284 under 2-year children in have provided Growth monitoring

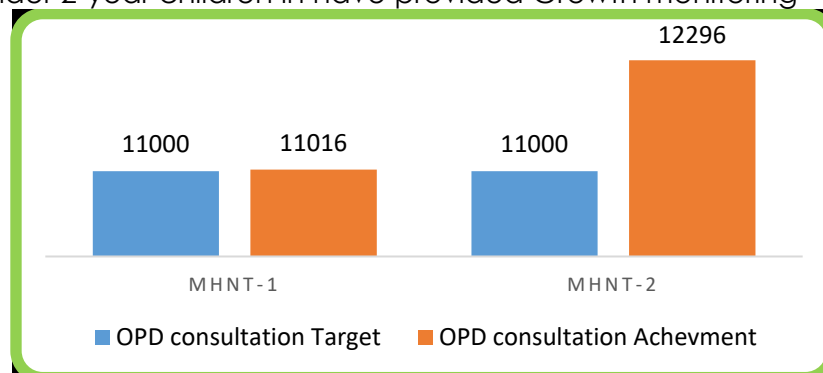


Figure 1 OPD consultation against targets during The Project

Lessons learnt:

Scattered living style of the nomad population especially in winter season and reaching all of them in their settlements during the heavy snowfall during the winter season were the main challenges however OPHCD managed to tackle this with careful implementation strategy through using 4X4 vehicles used for MHTs.



8. STRENGTHEN ROUTINE IMMUNIZATION PROGRAMS IN HELMAND AND URUZGAN

Project Title: Strengthen Routine Immunization Programs through the delivery of integrated basic primary health care services and acute undernutrition prevention and treatment programs in selected districts of Helmand and Uruzgan provinces, Afghanistan

Project timeline: November 2022 - December 2026

Funding agency: Global Polio Eradication Initiative (GPEI)

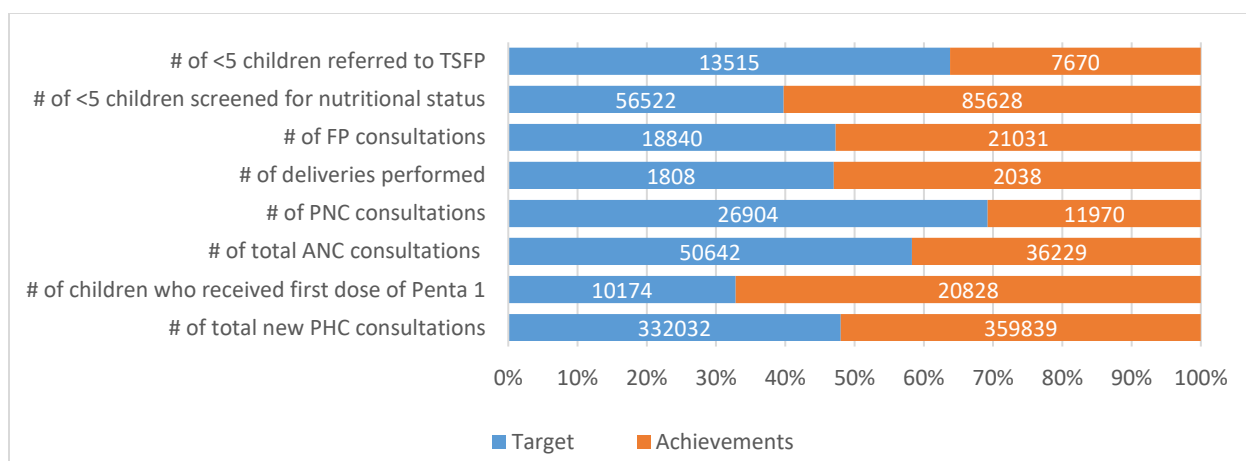
Budget: 5241143 USD

Project Overview: The project consisted of three components 1) provision of basic primary health care services including Out Patient Department (OPD) for children under five (referring to Integrated Management of Newborn and Childhood Illness – IMNCI - program), OPD for patients above 5 years (for the treatment of common diseases), and sexual and reproductive health and rights – SRHR (For women of reproductive age, 15-49 years old) 2) Provision of integrated community-based Management of Acute Malnutrition program (IMAM) comprising OPD SAM and MAM treatment for children under five and PLW, Maternal Infant and Young Child Nutrition (MIYCN), and growth monitoring promotion for children aged 0-24 months and 3) community-based health and nutrition program, which includes community mobilization, active case finding and referral, Mother to mother support, and group sessions.

Goals and objectives: The main goal of the program is to strengthen routine EPI through the delivery of integrated basic primary health care services and acute under-nutrition prevention and treatment programs in selected districts of Helmand and Uruzgan provinces. More specifically improving access to maternal and child routine immunization programs in Helmand and Uruzgan province and improve: vaccination coverage, community awareness of the benefits of maternal and child immunization and increase EPI services' community acceptance, and to contribute to the interruption of wild poliovirus transmission in Helmand and Uruzgan and prevent the occurrence of vaccine-preventable disease outbreaks.

Project Scope: Main activities Under the SRI program included management of 20 HFs in both provinces 10 each, with (188404) catchment area population. Provision of primary healthcare services such as OPD of children, OPD SAM and MAM for under five and PLWs, MCH health services such as ANC, PNC, deliveries and family planning and conducting safe delivery services accordingly, provision of MIYCN, and community outreach activities.

Project results: SRI project targets vs achievements Nov 2022 - Dec 2024



Lessons learnt:

- Services utilization and access could better be improved through decentralization, creates ownership and helps staff make informed decision for quality improvement.
- Proper coordination with local leaders increased attendance by mothers. Distribution of polio plus kit in low coverage HFs caused increased attendance to HFs of the pregnant women for giving safe delivery.
- Community participation and involvement improved their care seeking behavior and support with the health services in their catchment areas.
- Remote monitoring is a good approach to ensure availability of staff and provision of health services around the clock.

9. EMERGENCY NUTRITION SERVICES FOR CHILDREN < 5-YEARS AND PREGNANT AND LACTATING WOMEN OF NOMADS

Project Title: Provision of Emergency Nutrition services for children < 5-years and Pregnant and lactating women (PLWs) of nomad population through 29 nomad health clinics in 15 provinces of Afghanistan

Project timeline: September 2019 – February 2026

Funding agency: DWW-Turkey

Budget: 872,893 USD

Implementing partner: HAS (lead partner) and OPHCD as Technical implementer

Project Overview: Children < 5 years and PLW are the most vulnerable population groups posing to severe acute malnutrition (SAM). Children suffering from SAM are 9 times more likely to die than their healthy peers and those suffering from prolonged undernutrition who survive may become locked in a cycle of recurring illness and faltering growth, with irreversible damage to their development and cognitive abilities. Adverse effects of undernutrition in women affects their own health as well as later on the birth outcome of infants, causing inter-generational cycle of undernutrition. More than 2 million children of < 5-years are suffering from acute malnutrition in Afghanistan. A significant proportion (about 1 million) of these children continue to have no access to treatment especially nomad children. This is mainly due to lack of adequate resources and capacity to provide services through decentralized facilities, closer to communities.

Nomad population is a group of marginalized people, mostly in movement in different seasons with limited access to the health, education and other basic life facilities.

Nomads do not have access to the mass media such as TV, social media, public awareness materials and other public awareness campaigns and therefore their level of knowledge and awareness about the nutrition and other health issues is much lower,

It is anticipated that SAM prevalence rate and MAM incidence rate could be much more high among the children and PLWs of this marginalized population.

Approximately between 1.5 – 3.5 million nomad population live in the country mostly with mobile lifestyle and there have been only 29 health clinics providing health services for them with no Nutrition services and facility for treatment of severe acute malnutrition. For the first time, HAS/OPHCD with financial support of DWW Turkey introduced Nutrition program in nomad health clinics in 15 provinces.

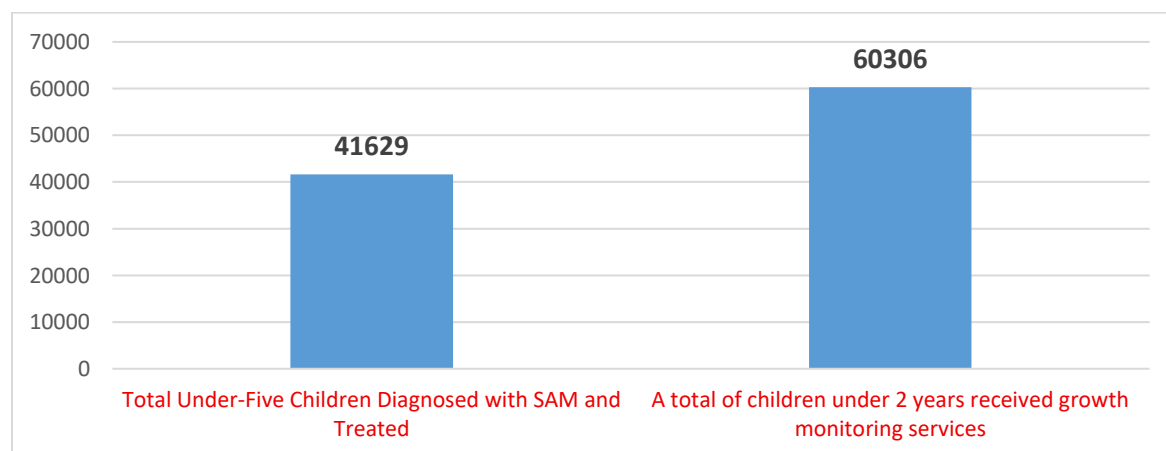
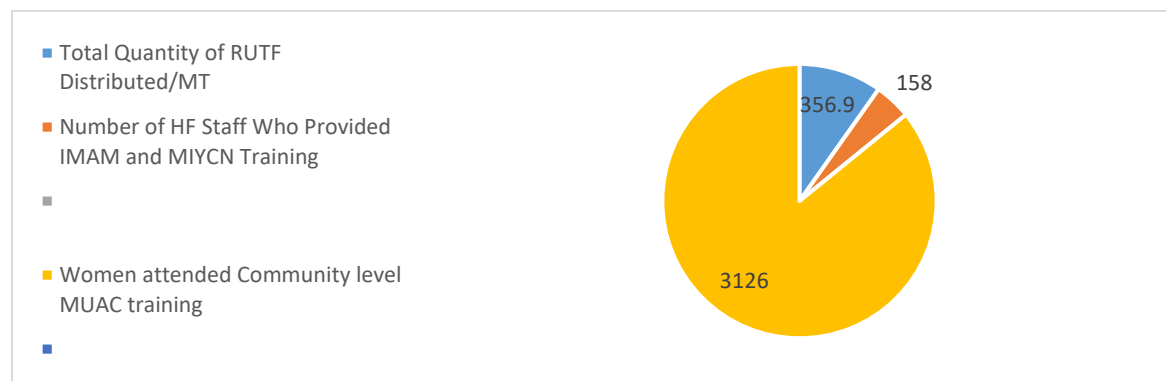
Goals and objectives: To contribute towards reduction in mortality and morbidity related to severe malnutrition in children under 5-year and pregnant/lactating women by introducing lifesaving nutrition interventions aiming to ; 1) institutionalize nutrition services in nomad health facilities, 2) improve social and behavior in nomad communities regarding nutrition and 3) identifying/ early case detection of malnourished children and PLWs among nomadic population.

Project Scope:

The project focuses on a multipronged strategy include: **1)** central, provincial and community level coordination and capacity building and cascading of infant and young child feeding to reach the nomads families and communities, improving data management/analysis and reporting/feedback system **2)** Creating an enabling environment for community outreach through cascading orientations and nutrition screening aimed to influence community religious leaders, community health committees (shuras) to assist in targeting child bearing aged women, and undertakes community sensitization activities **3)** Detection, diagnosis and treatment of severely acute malnourished <5 children and PLWs, strengthening referrals to higher level facilities for treatment, supplying the necessary medical and nonmedical items including distribution of Ready-to-Use Therapeutic Food and Ready-to-use supplementary Food packages.

Project results:

The project implementation is underway and it is expected to cover a high percentage of severely malnourished children and PLW women in nomadic communities with a greater positive impact on their social and behavioral setup. The date of the provided nutrition services during the project is shown in below charts:





10. TSFP PROJECT FOR NOMADS' <5 CHILDREN AND PLWS IN 15 PROVINCES OF AFGHANISTAN

Project Title: Targeted Supplementary Feeding Program for treatment of Moderate Acute Malnourished (MAM) children age 6-59 months and Acute Malnourished Pregnant & Lactating Women (AM-PLW) on the nomads' population through 29 nomad health clinics in 15 provinces of Afghanistan

Project timeline: July 2020 – December 2025

Funding agency: WFP

Budget: 233,050 USD

Project Overview: The nutritional situation in Afghanistan continues to be alarming. Despite remarkable achievements made in the health sector of Afghanistan still, data from Afghanistan National Nutrition survey 2013 and Afghanistan Demographic and Health survey (AfDHS, 2015) reporting worst status of health and nutrition indicators:

- Average Global Acute Malnutrition (GAM)¹ prevalence rate in children > 5 years is 16%,
- Sever Acute Malnutrition (SAM) prevalence rate in children > 5 years is 4.4%,
- Moderate Acute Malnutrition (MAM) prevalence rate in children > 5 years is 11.6%,
- 20.5% of pregnant & lactating Women (PLW) suffering acute malnutrition,
- 25% of children of 0-59 months are underweight,
- 40% of women of reproductive age have anemia.

Nomad population is a group of marginalized people, mostly in movement in different seasons of the year therefore they have limited access not only to healthcare & nutrition services they also lack access to public awareness campaigns and therefore their level of knowledge and awareness about the nutrition and other health issues is much lower. There is no specific evidence to showcase the nutrition status of the nomad population however, considering the very limited life facilities and traditional life style with low access to the health services, mass media and other public awareness campaigns, it is anticipated that SAM prevalence rate and MAM incidence rate could be much higher in the children and PLWs of this marginalized population.

To provide a humanitarian response primarily focusing on provision of life saving nutrition services based on the request of the Nomad Health Care Directorate (NHCD) and the Public Nutrition Directorate (PND) of the MoPH Afghanistan, OPHCD with financial and supply support of Nutritious foods implementing this project to ensure continuing of nutrition services especially detection, diagnose and treatment of MAM in children under the age of 5 years as well as acute MAM in Pregnant and lactating women through the

¹ Global Acute Malnutrition (GAM) is the presence of both Moderate Acute Malnutrition (MAM) and Sever Acute Malnutrition (SAM) in a population. A GAM value of more than 10 percent indicates nutrition emergency. High prevalence rates outside of the seasonal norm are particular cause for concern. WHO. 2000. The Management of Nutrition in Major Emergencies.

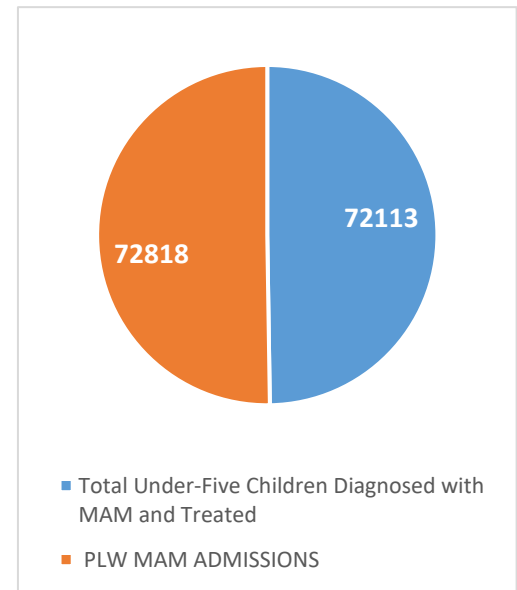
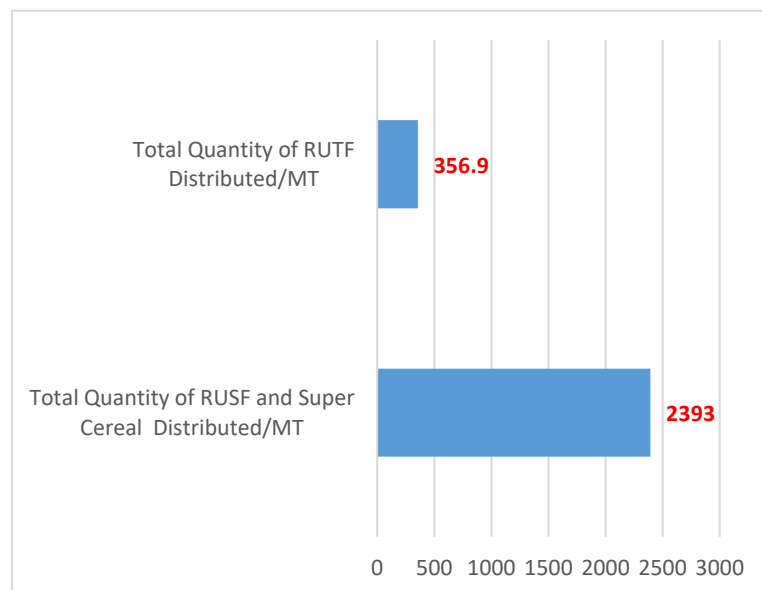
29 functional nomads' health clinics in 15 provinces of Afghanistan for the nomad population.

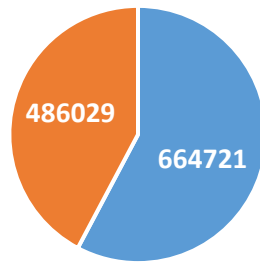
Project goals: To contribute toward reduction in mortality and morbidity related to Moderate Acute Malnutrition in children under 5 years of the age and pregnant and lactating women of the nomad population by introducing lifesaving nutritional intervention through implementation of TSFP project

Project Scope: The project focused on below activities to achieve the respective objectives:

- 1) Capacity building of the staff through conducting initial trainings of IYCF and IMAM for newly hired staff, on the job training during the supervisory visits to the health clinics and capacity building of the managerial staff of the Nomad health care directorate in regard to the nutrition and IMAM treatment approach,
- 2) Strengthening the present monitoring system and conducting regular monitoring missions to the health clinics for continues,
- 3) Conducting 5 days IMAM training for 30 Doctors and nurses and 6 days IYCF training for 10 midwives of the nomads' health clinics
- 4) Supply of medical and non-medical equipment and fortified foods rations to all 29 nomad health clinics in 15 targeted Provinces
- 5) Screening, detection, diagnose and treatment of OPD- MAM in children under the age of 5 years and Pregnant and Lactating Women,
- 6) Supply and distribution of 65.92 Metric ton RUSF and 70.56 Metric ton Super Cereal for treatment of eligible MAM children and AM-MAM PLWs respectively

Project Results:





■ Total Children Under 5 Year Screened

■ Total PLW Screened

11. TSFP PROJECT IN HELMAND AND URUZGAN PROVINCES

Project Name: Targeted Supplementary Feeding Program for treatment of Moderate Acute Malnourished (MAM) children age 6-59 months and Acute Malnourished Pregnant & Lactating Women (AM-PLW) through 263 HF's

Project timeline: January 2024 – December 2025

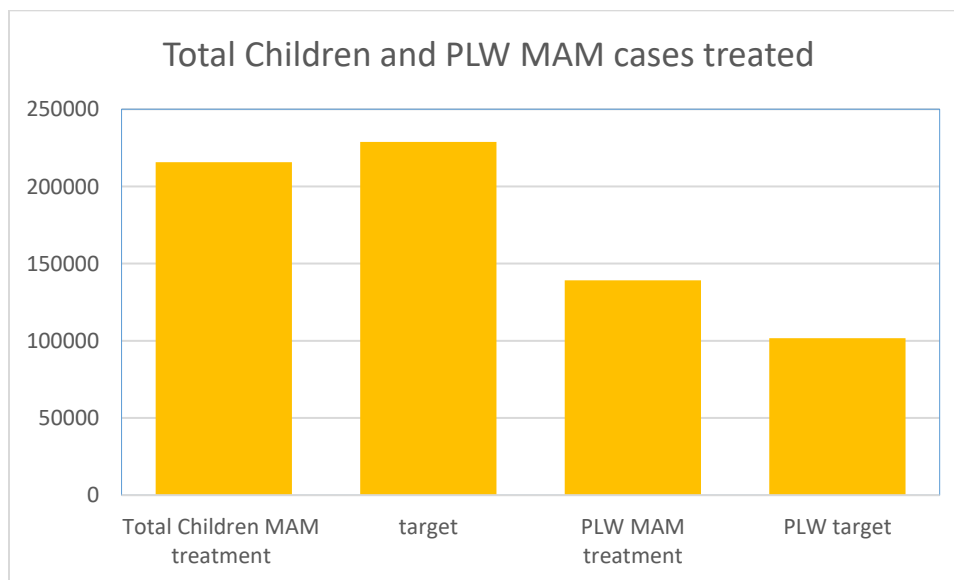
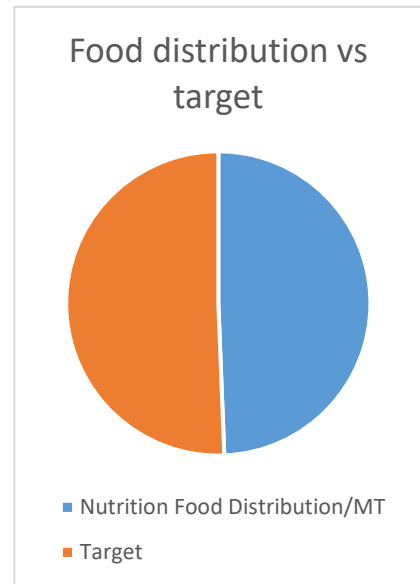
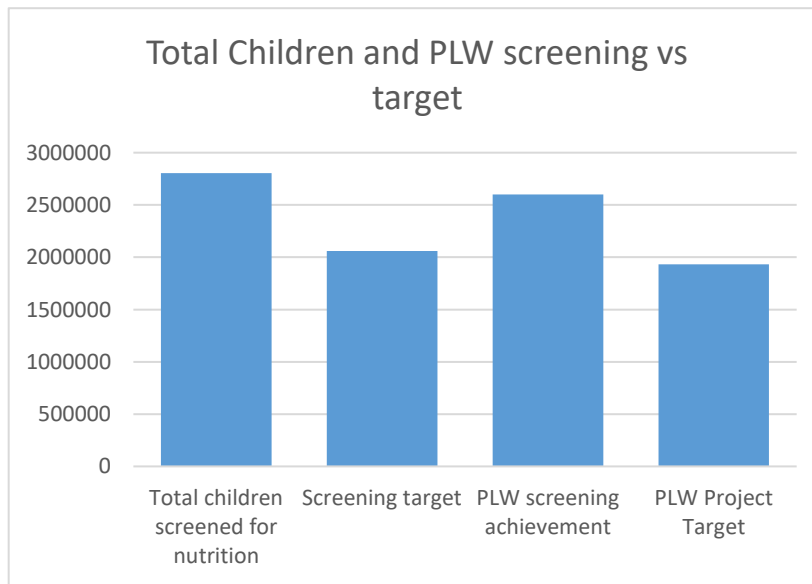
Funding agency: WB through UNICEF

Budget: 2,302,818 USD

Project Overview: Afghanistan "Nutrition Cluster Caseload calculation 2023 HNO/HRP" flagged Helmand and Uruzgan provinces among the top in Nutrition emergency status with a high prevalence of severe acute and moderate malnutrition among children <5 years and pregnant and lactating women (PLW). OPHCD proposed Therapeutic Supplementary Feeding Program (TSFP) to be implemented in 263 HF's of both provinces. The project focus was on 1) continuing nutrition programs through the entire health facilities and communities of both provinces 2) capacity building of management and HF's staff in nutrition program, 3) maintaining nutrition surveillance and reporting system, 4) examine, diagnose and treat more than 35,000 <5 children and PLWs and 5) distribution of around 6,181 metric tons of Food ration to more than 350,000 boys, girls, and PLWs until they become healthy.

Project Scope: key activities included: a well-crafted coordination strategy at central, provincial and community levels, effective office management set up, setting-up of TSFP food storage facilities, weekly-based data collection and entry in the online system, monthly based data analysis/ feedback to the weak performing TSFP sites at the province level, regular periodic review meetings, timely preparation and timely supply of the food items, printing/supply of TSFP forms, registers, cards and reporting tools, training need assessment (TNA), training of staff on TSFP implementation and community outreach according to the training plan, identifying cases and admit them in the program for treatment, referrals as required, provision of social behavior change communication (SBCC), conducting close monitoring and supervision.

Results: The results are illustrated in below charts:



The Story of Spoogmai: A Mother's Journey to Better Health

Spoogmai, a 31-year-old mother, lives in a remote area of Urozgan province, where she faces the daily challenges of raising her three children. One of her children, Samir, who is just two years old, was weak and struggling to gain weight. He frequently fell ill, which deeply concerned Spoogmai. However, she was unsure of how to address his condition and felt helpless in improving his situation.

When Spoogmai learned about a nutrition program available at a clinic located some distance from her home, she made the difficult decision to travel in search of help for Samir. Upon arriving at the clinic, the nutrition staff conducted a thorough screening and confirmed that Samir was malnourished. The team took the time to educate Spoogmai about the critical importance of nutrition and how supplementary feeding could help improve Samir's health. She was provided with Ready-to-Use Supplementary Food (RUSF)

and Super Cereal, not only for Samir but also for herself, as she was diagnosed as malnourished and pregnant at the time. The clinic staff carefully demonstrated how to use the supplements correctly to maximize their benefits.

Spoogmai was encouraged to return regularly for follow-up visits at the clinic to monitor Samir's progress. Over the following months, she diligently followed the nutritional guidelines provided by the program. Gradually, Samir's health began to improve. His energy levels surged, and he started walking and playing with other children in the village. His weight steadily increased to healthy levels. Spoogmai was overjoyed to witness this remarkable transformation, not only in Samir's health but also in her understanding of nutrition for herself and her family.

Impact on the Community

Spoogmai's story is one of many that highlights the transformative role of the TSFP nutrition center in the lives of malnourished children and mothers. The program not only provided immediate relief through supplementary food but also empowered families with essential knowledge about nutrition, health, and the importance of regular medical checkups. As a result, Samir became a healthier child, and Spoogmai emerged as a role model for other mothers in her community. Her experience inspired other women to participate in the program, contributing to an overall improvement in the health and well-being of the entire community.

