

Strengthening Integrated Management of Acute Malnutrition: Enhancing Capacity of Health Care Workforce and Systems on IMAM in Kwale County

Annette Swa, Faith Mwangi, Rachel Jumwa, Francis Nanga, Happiness Oruko, John Kutna, Dr.Oyaro, Dr.Philip Masaulo, Jane Muthegi

¹USAID Stawisha Pwani – Amref KCO

¹Corresponding Author Email: annetteswa44@gmail.com

Abstract

Kwale County, comprising five sub-counties faces significant challenges related to acute malnutrition, with notable rates of stunting, underweight, and wasting. According to the Long Rain Assessment 2022, integrated Phase Classification acute malnutrition was classified in the Alert Phase (IPC Phase 2) in both livelihood zones. In 2022, County Stunting levels dropped from 34.2% reported in 2012 to 29.5% reported in 2022 which remains at a high prevalence level compared to the national level where 22.7% of children under-5 are stunted (KDHS, 2022). Therefore, integrated management of acute malnutrition (IMAM) services is crucial in addressing malnutrition, with 137 health facilities implementing these services alongside other nutrition interventions. However, the effectiveness of these interventions depends on the capacity of healthcare workers. Thus, through the USAID Stawisha Pwani Project, which supported capacity building for 180 healthcare workers for effective nutrition assessment and management. The overall objective was to equip the healthcare workers with the necessary capacity to manage early detection and treatment of acute malnutrition, prevent malnutrition through public health interventions and education, use appropriate measurements for identification and referral of malnourished children, and strengthen referral pathways for IMAM programs. The methodology involved conducting training sessions for healthcare workers focusing on IMAM principles and emerging evidence on the management of at-risk mothers and infants under six months of age. The Results reveal that an improved screening and early identification of acute malnutrition cases, with more children enrolled in the IMAM program. Non-cured children in outpatient therapeutic programs also showed a downward trend, suggesting improved quality of care. In conclusion, sustaining efforts to address acute malnutrition requires ongoing training, mentorship and on-the-job support for healthcare workers. This approach not only enhances retention of skills but also expands the pool of trained staff, thereby improving health outcomes for mothers and children. Such strategies are vital for achieving sustainable development goals and realizing national objectives for health and nutrition and therefore continued investment in training and support programs is essential for reducing malnutrition and promoting the well-being of communities in Kwale County and beyond.

Keywords; Malnutrition, Integrated Management of Acute Malnutrition, Long Rain Assessment