

Integrating a six-month contact point for vitamin A supplementation, Infant and Young Child Feeding counselling and family planning within routine health services in Sierra Leone



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Introduction

Since 2004, twice-yearly mass vitamin A supplementation (VAS) has reached over 85% of children 6-59 months of age in Sierra Leone. Although VAS coverage is consistently high in mass campaigns routine VAS at 6 months is low: <5%.

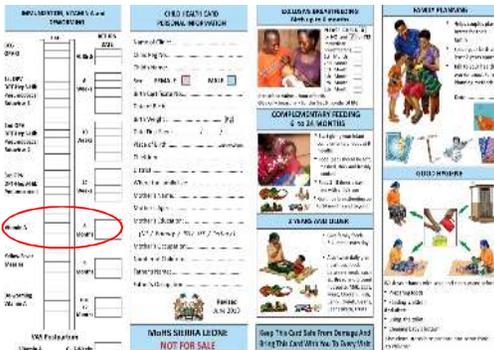
Routine IYCF 'health education' and the provision of family planning (FP) commodities are part of the basic package of free health care in SL and child spacing of >36 months is estimated to reduce child mortality by 25%. However contraceptive coverage for women of child bearing age is low: 8%.

Objective

To pilot test the integration of six month contact point for Vitamin A into the Expanded Program of Immunisation (EPI).

Methods

Methods: New child health cards were developed with VAS integrated into the EPI schedule at 6 months.



New child health cards: Front

Twelve health facilities were matched according to staff levels, cadre and work load and assigned to provide one of the following:

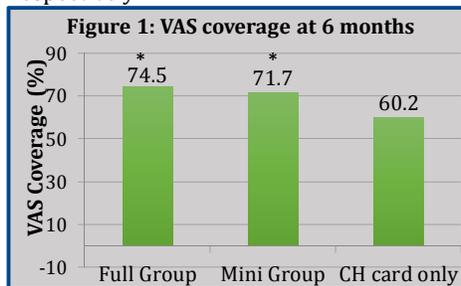
- 1) New health cards with VAS at 6 months only, continuing with the previously defined 'routine' health services;
- 2) A 'mini package' of VAS and Infant and Young Child Feeding (IYCF): counselling with the active participation of the mother in the preparation and feeding of a complementary food to her infant;
- 3) A 'full package' of VAS, IYCF and routine family planning (FP) counselling and commodities

Caregivers of all enrolled children received modified child health cards. 400 infants were enrolled into each group between birth and 3 weeks of age and followed until they were 12 months old.

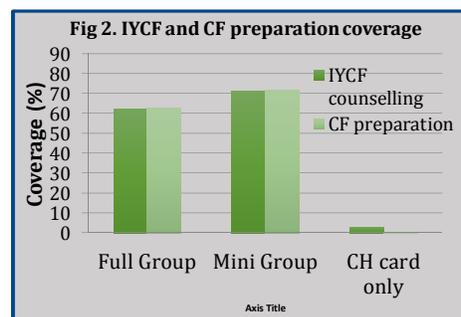
Health workers were provided with training on how to record information on the new child health cards which included the new WHO growth standards (Z scores). Data was recorded by health workers and collected by enumerators visiting the facilities on child health days. Missing data was obtained from examining facility records and home visits.

Results

At six months, 380, 378 and 397 mothers and their infants were traced in the full, mini and new child health card only groups respectively.



Routine VAS coverage at six months increased to >60% in all groups. More children in the full and mini package groups received VAS compared with the new child health card only group (p<0.05).



IYCF counselling was provided and mothers participated in the preparation of complementary food to >62% mothers in the full and mini compared to 3% in the child health cards only group (p<0.0001).

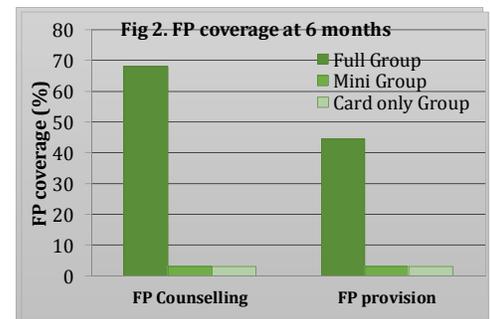


The mother if a 6 month old infant participating in the preparation of complementary food



Mother of an infant 6 months of age being offered routine family planning counseling and commodities

FP counselling was provided to 61.8% (235/380) mothers and FP commodities to 44.5% (169/380) in the full group compared with <3.0% in the mini and new child health cards only groups (p<0.0001).



Conclusion

The six-month contact point integrated into the Expanded Program of Immunisation schedule on the new child health cards increased VAS coverage to >60%.

The impact of the provision of routine IYCF counselling and the active participation of mothers in the preparation and feeding of their infants is being followed-up over a longer time-frame

The routine provision of FP counselling and commodities at the six months provided an opportunity for 44.5% mothers to access modern forms of contraception.

Acknowledgements

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