

- REDUCE LOW BIRTHWEIGHT
- INCREASE THE RATE OF EXCLUSIVE BREASTFEEDING TO 50%
- INCREASE THE COVERAGE OF TREATMENT SERVICES TO >75% FOR WASTED CHILDREN
- IMPROVE CHILD HEALTH BY ACHIEVING UNIVERSAL HEALTH COVERAGE, INCLUDING ACCESS TO QUALITY ESSENTIAL HEALTH-CARE SERVICES FOR A SELECT % OF THE POPULATION

OUTCOME 1
REDUCE LBW BY IMPROVING MATERNAL NUTRITION

SYSTEM	PRIORITY ACTION/SERVICE
HEALTH	Provision of package of essential nutrition interventions as per WHO recommendations during antenatal care Iron and folic acid supplementation coupled with SBCC on nutrition and reproductive health targeting adolescent girls
FOOD	Home vegetable gardening and seed support to produce a variety of plant origin foods; support to small livestock keeping coupled with SBCC to promote the consumption of nutritious foods Support capacity building of national/local institutions, producers and small holder farmers to increase/diversify the production of nutritious foods (agro-ecological, locally adapted, bio-fortified, animal source foods) Facilitate the access of producers to fertilizers, phytosanitary products, tractors, and animal traction kits Support the development of policies and regulations that promote and increase access to healthy diets Capacity building for the local production, quality control and marketing of fortified complementary foods for children 6-23 months as well as fortified cereals for pregnant women
SOCIAL PROTECTION	School feeding, iron and folic acid supplementation, sensitization on hand washing and menstrual hygiene targeting adolescent girls Conditional cash transfer programs targeting pregnant women attending ANC services

OUTCOME 3
IMPROVED IYCF BY IMPROVING BREASTFEEDING PRACTICES AND CHILDREN'S DIETS IN THE FIRST YEARS OF LIFE

SYSTEM	PRIORITY ACTION/SERVICE
HEALTH	Strengthen and expand the promotion of improved IYCF practices (SBCC through different communication platforms including promotion of diversified, affordable recipes based on locally available and affordable foods for complementary feeding) Strengthen and expand the Baby-Friendly Health Facility Initiative and strengthen continued breastfeeding support to communities through intergration of the 10 steps for improved quality of care for mothers and newborns Strengthen and expand mother-kangaroo care for low birth weight and sick newborns
FOOD	Support to local food production to improve diversification (plant based foods, small ruminants, fish), as well as support to the local production of fortified cereals Provide specialized nutritious food, cash/voucher including nutrition during lean season to support adequate diets for pregnant women and infants and young children up to 2 years of age Expand micronutrient fortification programmes through home fortification with micronutrient powders as well as large scale food fortification
SOCIAL PROTECTION	Support development and implementation of nutrition sensitive social protection national framework, and its operational guidelines to improve access to age-appropriate nutritious foods and to quality health care among children 6-23 months and pregnant women

OUTCOME 2
IMPROVED CHILD HEALTH BY IMPROVING ACCESS TO PRIMARY HEALTH CARE, WASH SERVICES AND ENHANCED FOOD SAFETY

SYSTEM	PRIORITY ACTION/SERVICE
HEALTH	Strengthen and expand the implementation of the integrated community case management (iCCM) approach, and increase access to routine immunization services Strengthen and expand physical/nutritional assessment for pregnant and lactating women as well as growth monitoring for children under five years
FOOD	Reduce contamination of crops in farms, enhance food safety in markets, and improve food storage and food handling at household level
WASH	Promote IYCF and other key family care practices, including hand washing and IPC measures as part of nutrition interventions Support the Government in scaling-up implementation of the WASH-in-Nut strategy Promotion of improved IYCF and hygiene practices through community-led total sanitation (CLTS) platforms

OUTCOME 4
IMPROVED TREATMENT OF CHILDREN, PLW, PLWHIV WITH WASTING BY STRENGTHENING HEALTH SYSTEMS AND INTEGRATING TREATMENT INTO ROUTINE PRIMARY HEALTH SERVICES

SYSTEM	PRIORITY ACTION/SERVICE
HEALTH	Scale-up of the Mother/Family MUAC approach for early detection and referral of children with wasting Support (capacity building) for the decentralization of treatment of children with wasting from health centers to community health platforms (integration with iCCM interventions) Screening for malnutrition (MUAC) through Seasonal Malaria Chemoprevention (SMC) campaigns as well as during food distribution activities; and timely referral of wasted children to nearest health facilities Strengthen supply chain management to ensure the timely availability of nutrition and medical supplies for the management of child wasting at health facility level
FOOD	Food assistance to caregivers of children with wasting who are hospitalized with medical complications
SOCIAL PROTECTION	Implementation of social assistance programs (cash or in-kind) targeting households with children under five years at risk of wasting