ACUTE MALNUTRITION MANAGEMENT ACTION (AMMA) PROGRAM INITIATIVE

In a nutshell: Acute Malnutrition Management Action (AMMA), is a community-based programme for management of acute malnutrition.

Nodal agency: Department of Women & Child Development, Government of Rajasthan in collaboration with medical and health department of Dungarpur district.

The AMMA program was executed from July 2020 to January 2021 in 212 AWCs of seven ICDS sectors of Dungarpur block of district Dungarpur, Rajasthan. In this program children in the age group of 6 - 59 months were screened, identified, treated and follow-up was conducted on MCHN days at AWC level and energy dense nutrition supplement (EDNS) packets were provided to the children enrolled as SAM but without medical complication, as per the guidelines of AMMA program. This program was implemented by ICDS in collaboration with the medical and health department of Dungarpur district.

The pilot was conducted in 4 phases during implementation:

- 1. **Screening** of children under 5 years of age (U5) by ASHAs through Mid Upper Arm Circumference method—conducted in the month of June July 2020.
- 2. **Identification and enrolment** of screened children by anthropometric measurement (MUAC, Weight, Height/Length) at AWCs by ASHA & AWW, along with health check-up conducted by ANM for medical complications and appetite test at MCHN session sites conducted in the month of July 2020.
- 3. **Treatment** for two months using EDNS packets based on the child's weight, monthly anthropometric measurement at MCHN session sites, and weekly home visits by ASHA/AWW conducted in the months of August and September 2020.
- 4. **Follow-up** for four months without EDNS, home visits and monthly anthropometric measurement conducted from October 2020 to January 2021.

The Regional Centre of Excellence (RCoE) team with support from Integrated Child Development Services (ICDS) Directorate and UNICEF provided online training to all female supervisors and NNM staff of Dungarpur block, developed data collection and reporting formats and coordinated with ICDS Dungarpur for the implementation of the pilot.

Based on final data reported in Google sheets 13,023 children were screened by ASHAs in the entire Dungarpur block of which 443 (3.4%) children with SAM were identified without any medical complication and enrolled in the AMMA program.

Outcome:

88.6% children in the 6 - 59 months age group were screened by ASHAs in seven sectors
of Dungarpur block and 3.6% of screened children were enrolled in the program after

- conducting anthropometric measurement (Weight, Height/Length and MUAC). Enrolment ratio is very low as compared to NFHS-4 (2015-16) data in which 16.1% of severely wasted children were there in district Dungarpur.
- Higher number of girls (56%) were enrolled in the program than boys (44%), signifying a higher prevalence of wasting among girls in the area. Also, Dungarpur is a tribal majority district with highest sex ratio (994) in Rajasthan (Census 2011).
- Highest SAM prevalence recorded in Thana sector with 5% enrolment, and lowest in Dungarpur and Metali sectors with 2.9% each.
- More than 87% children recovered during the treatment phase and very few <3% defaulted from the program. Recovery rate shows that the program was implemented effectively. Highest number of children (90%) recovered in Thana and Kheda sectors whereas lowest (84%) children recovered in Gada Marrya sector.
- No child death was reported among enrolled children during the treatment and follow up period.
- 100% recovered discharged children attended first follow-up, whereas 95% attended fourth follow-up. Follow-up percentage reduced gradually till third follow-up then after intervention from RCOE team follow-up percentage increased in fourth follow-up.
- 100% of recovered discharged children maintained their malnutrition status in normal range (Green zone). Till fourth follow-up 88% children maintained their malnutrition status in normal range (Green zone).



Growth monitoring at Anganwadi centre