

COUNTRY BRIEF: **LESOTHO**

A multisectoral approach to preventing malnutrition of mothers and children

Introduction to IYCN in Lesotho

From 2007 to 2010, the US Agency for International Development's Infant & Young Child Nutrition (IYCN) Project supported Lesotho's Ministry of Health and Social Welfare (MOHSW) to improve the nutrition of mothers and their children younger than two years of age, with a focus on those affected by HIV. The project strengthened national nutrition and prevention of mother-to-child transmission of HIV (PMTCT) policies and programs and conducted supportive activities at health facilities and within communities. As a result of the project, there is now a strengthened referral system, which allows community health workers to refer mothers and children to providers at facilities and providers to refer their patients back to community health workers for follow-up. Building the capacity of a wide range of community workers resulted in supportive networks for improved feeding practices in many communities, including among village chiefs, traditional healers, and men's groups.

Context for nutrition programming

Forty-two percent of children younger than five years of age are chronically malnourished in Lesotho.¹ Poor feeding practices contribute to malnutrition during the first

two years of life. Although exclusive breastfeeding is recommended until infants reach six months of age, nearly half of infants in Lesotho receive additional liquids and solid food at two months.² At six to seven months, when babies should be introduced to solid foods, 30 percent of infants only consume liquids.³ The mixed messages mothers receive from health workers, community health workers, and other community members, who lack adequate knowledge about the importance of exclusive breastfeeding and how to support good feeding practices, contribute to these feeding problems. Twenty-six percent of women in Lesotho aged 15 to 49 years are HIV-positive,⁴ making them particularly in need of nutrition counseling from trained health workers to ensure their children's HIV-free survival.

A needs assessment conducted by the government revealed that although many providers at health facilities had been properly trained and could provide supportive nutrition counseling to new and expectant mothers, community-based support structures in Lesotho were weak. To improve the country's PMTCT and pediatric HIV care and treatment programs, IYCN focused on helping government ministries to build the capacity of these community-based systems, particularly those managed by the MOHSW, the Ministry of Education,

1 Ministry of Health and Social Welfare (MOHSW), Lesotho; Bureau of Statistics (BOS), Lesotho; and ORC Macro. *Lesotho Demographic and Health Survey 2004*. Calverton, Maryland: MOHSW, BOS, and ORC Macro; 2005.

2 Ibid.

3 Ibid.

4 Ibid.



Ram Shrestha

Built capacity of health workers to support mothers

IYCN and the MOHSW co-facilitated a participatory workshop with key nutrition and PMTCT stakeholders to develop a new *National Infant and Young Child Feeding Curriculum for Health Workers*, counseling cards, and take-home brochures reflecting the updated national policy and international recommendations on infant feeding and HIV. The project pre-tested the curriculum with 22 district-level trainers, and in March 2010, the MOHSW started rolling out the curriculum to train health workers across the country. Through capacity-building workshops with nurses, IYCN improved the monitoring and evaluation of infant and young child nutrition data collected at facilities.

and the Ministry of Agriculture. The project also established new sources of support within communities and strengthened linkages between those communities and nearby health facilities.

Project activities and accomplishments

IYCN took a multisectoral approach to improving and scaling up national nutrition and PMTCT programs, working closely with the Ministry of Agriculture, the Ministry of Education, and with other organizations receiving funding from the US President’s Emergency Plan for AIDS Relief to integrate nutrition interventions into existing activities in five districts. These organizations included the Elizabeth Glaser Pediatric AIDS Foundation, the International Center for AIDS Care and Treatment Programs, and mothers2mothers.

Enhanced national nutrition guidelines

IYCN helped to set a countrywide standard for improved feeding practices by supporting the revision of Lesotho’s National Infant and Young Child Feeding Policy and incorporating the World Health Organization’s guidelines on HIV and infant feeding into national PMTCT guidelines. In February 2010, IYCN assisted the MOHSW with presenting the infant and young child feeding guidelines to the Minister of Health.

“I learned that breastfeeding alone does not satisfy the baby after six months, so I have to add other foods that are good for my child.”

—Mother, Litsoeneng

Facilitated multisectoral collaboration

To effectively reach communities with information about optimal feeding practices, the project fostered collaboration among three government ministries to develop joint training and supervision activities. A cascade-style approach to training community workers enabled IYCN

“We cannot afford to go house to house. If we need to get information to the villages, the community health workers are there on our behalf.”

—Adelina, Nurse, Litsoeneng Health Centre



PATH/Christine Demmelmaier



Makatleho Masoabi

committees in some villages, which included traditional healers, grandmothers, and priests. By sensitizing village chiefs, traditional healers, community councils, grandmothers, and men’s groups, community health workers broadened support for infant and young child nutrition, which led to more public discussions about the issue. The project informally integrated traditional healers into the referral system, through which they referred mothers to community health workers.

By performing supervisory visits with 270 health providers trained by the project, IYCN monitored the two-way referral system between facilities and community health workers. Project staff also monitored community activities initiated through the project, such as growth monitoring and promotion, health talks, the creation of keyhole gardens, and cooking demonstrations. Health workers reported significant improvement in community-based growth monitoring and promotion sessions and said they were better able to detect and refer children who were growth-faltering, while keyhole gardens became a user-friendly, inexpensive, local source of vegetables.

to reach more caregivers with nutrition support. For example, IYCN supported the MOHSW to train 29 trainers at the Ministry of Agriculture, who then conducted “step-down trainings” with 496 home economists and other workers. IYCN also trained trainers at the Ministry of Education, who then trained early childhood care and development teachers. Both sets of trainees gave health talks at local clinics. The home economists showed mothers how to prepare food for their children and the teachers led discussions about good nutrition. Additionally, IYCN collaborated with each ministry to train 246 traditional healers in villages and 30 mentor mothers from mothers2mothers about how to counsel HIV-positive mothers on infant feeding.

“The benefit of having the village chief organize the gatherings is that Lesotho people believe in their village chiefs, and information that comes from the chief is considered very important.”

—Makatleho Masoabi, IYCN Country Coordinator

Increased community support

Over the life of the project, IYCN supported the training of nearly 750 community health workers to counsel mothers on infant and young child feeding. Trained community health workers increased community support for optimal infant feeding practices and improved social norms, individual attitudes, and infant feeding behaviors. Through household visits, community health workers reached pregnant women and breastfeeding mothers two to four times each month. Community health workers also helped health workers create breastfeeding



Makatleho Masoabi

Lessons learned

- Shared work plans are critical for collaboration among different sectors to carry out joint training and supervision activities.
- Community health workers can reinforce good nutrition practices in their communities, particularly through outreach to key influencers like village chiefs.
- A cascade training approach can help programs with limited resources reach more community workers.
- Health workers may initially be reluctant to refer mothers to community health workers. Supervisory visits are a good opportunity to encourage health workers to communicate regularly with community health workers and to refer mothers to them for follow-up.
- Enabling a referral system between communities and facilities is important to supporting the feeding practices of mothers every step of the way, from pregnancy until their children reach two years of age.
- Facility-based health providers may need specific training on how to effectively document referrals and compile monitoring data collected from community health workers.

Mamorena's story: helping babies grow up healthy and strong

It wasn't until Mamorena volunteered to be a community health worker in rural Lesotho that she learned why her first child was frequently ill as an infant. After she gave birth to her son, she only gave him water for the first seven days, delaying breastfeeding until his umbilical cord fell off—a common cultural practice in Lesotho. She eventually added breastmilk and soft porridge to his diet.

While in an IYCN training to be a community health worker, she learned that the addition of foods and liquids—even water—during the first six months of life puts infants at risk of illness, infection, stunted growth, and death.

After the training, when Mamorena gave birth to her second son, she began breastfeeding immediately and exclusively. As a community health worker, she continues to share what she learned with people in her village.

Looking ahead

A wide range of partners will continue to build upon IYCN's experiences, lessons learned, and tools as they aim to reduce maternal and child malnutrition and increase HIV-free survival. The MOHSW plans to finalize and disseminate the revised infant and young child feeding policy and has developed a plan to roll out the new curriculum and counseling cards to train health workers across the country. District-level trainers are continuing to train community health workers who in turn support healthy nutrition practices in their communities.

Available resources

- Infant and Young Child Feeding Counseling Materials (2008)
- National Infant and Young Child Feeding Curriculum and Participant's Manual (2010)

Visit www.iycn.org/Lesotho



PATH/Christine Demmelmaier

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The Infant & Young Child Nutrition Project is funded by the United States Agency for International Development. The project is led by PATH and includes three partners: CARE, The Manoff Group, and University Research Co., LLC. For more information, please contact info@iycn.org or visit www.iycn.org.