

SCN Working Group on Micronutrients: Information Sharing Template for 2006 and Earlier Activities

Table 1: Demographic Information

Reporting Individual	Djibril Cissé
Institution/Organization	Helen Keller International – Senegal
Contact address (Email)	dcisse@hki.org or jibycisse@yahoo.fr
Position	Nutrition Program Coordinator
Department/Section	Nutrition
Major focus of activities	Support to others, Research, Policy/Advocacy, Programming/Interventions
Summary of activities	In the Nutrition Program, HKI Senegal Program provides support to sustain High Vitamin A coverage. The other focus area is to support the process of food fortification in Senegal through a national food fortification strategic plan (<i>Vegetable oil with vitamin A and wheat flour with Iron/Folic acid</i>).

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Table 2: Measurement, assessment, monitoring and reporting micronutrient deficiencies

Geographic area(s) covered by this table	Senegal (country level)														
Project Name (if relevant)	Sustained High Vitamin A coverage in West and Central Africa														
Supporting Agencies (if relevant)	Canadian International Development Agency, Micronutrient Initiative														
Approximate # of beneficiaries	2,000,000 children aged 6 months to 5 years														
	Micronutrients														
	Iodine	Iron	Folate	Zinc	Calcium	Vit A	Vit B-12	Vit C	Vit D	Vit B-1	Vit B-2	Vit B-3	Vit B-6	Vit K	Vit E
Activities															
Prevalence Assessment		X				X									
The 2005 Senegal Demographic and Health Survey estimates that 84% of children < 5 are anemic. HKI and UNICEF developed a protocol in order to assess the impact of 3 nationwide campaigns of coupling de-worming and Vitamin A Supplementation, on iron deficiency anemia among children under 5-years.															
Training/Capacity Building						X									
At operational level training sessions are organized during each Local Vitamin A Supplementation Days coupling with de-worming. Training is identified as sector of intervention in a “Minimum Support Package” developed with the national level.															

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Monitoring and Evaluation

Monitoring of routine vitamin A supplementation has been integrated in the National system of Sanitary Information.

Analysis and Reporting

An annual report to CIDA and MI was planned in collaboration with UNICEF. But the Food, Nutrition and Child survival Division of the Ministry of Health and Medical prevention disseminate systematically reports on mass campaign.

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Table 3: Food Fortification

Geographic area(s) covered by this table	Senegal (country level)														
Project Name	Support to the Food Fortification process in Senegal														
Supporting Agencies	Health Care Financing and Policy Component of USAID Health Program in Senegal, implementing by Abt. Associate														
Approximate # of subjects or beneficiaries for each project described	11 000 000 (total population of Senegal) but children under (2 000. 000) and women of childbearing age (15-to-44 years old) are primary beneficiaries.														
	Micronutrients														
	Iodine	Iron	Folate	Zinc	Calcium	Vit A	Vit B-12	Vit C	Vit D	Vit B-1	Vit B-2	Vit B-3	Vit B-6	Vit K	Vit E

Commodities

Results from using the Fortification Rapid Assessment Tool (FRAT) were been presented during the launching workshop of the process of food fortification in Senegal (held in February 2006). Five potentials commodities were targeted (*cooking oil, sugar, wheat, bouillon cube and tomato concentrate*), but it was been recommended to make the focus on fortification of wheat with iron/acid folic and vegetable oil with vitamin A.

Wheat		X	X												
Cooking Oil						X									

Activities

Policy and Advocacy															
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✚ HKI support the process of food fortification with the creation the National Alliance for Food Fortification (COSFAM is the French acronym). The decree N°001717 related to the creation of National Alliance for Food Fortification was signed by the Prime Minister in

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Table 4: Vitamin and Mineral Supplementation

Geographic area(s) covered by this table	Senegal (at national level)														
Project Name	Sustained High Vitamin A coverage in West and Central Africa														
Supporting Agencies	Canadian International Development Agency, Micronutrient Initiative														
Approximate # of subjects or beneficiaries for each project described	2,000,000 children aged 6 months to 5 years														
	Micronutrients														
	Iodine	Iron	Folate	Zinc	Calcium	Vit A	Vit B-12	Vit C	Vit D	Vit B-1	Vit B-2	Vit B-3	Vit B-6	Vit K	Vit E
Activities															
Prevention Program		X				X									
NIDs in Senegal were a relevant opportunity to ensure the second dose of vitamin A supplementation each year among children aged 6 months to 5 years. With the context of polio eradication drawing to a close, NIDs are being phased out, and there is a major challenge of ensuring high levels of Vitamin A Supplementation coverage twice per year. One of the project results is to develop non-NIDs Vitamin A strategy. In Senegal, the project aims to achieve high coverage of vitamin A supplementation with the following strategies: Local Supplementation Days, Child Survival Days, Child Health weeks, reinforcement of the routine system.															
Treatment Orientation						X									
Implementation and reinforcement of vitamin A supplementation through routine health services.															
Supplementation project size															
National/Regional Program						X									
<p>The project is a regional initiative (west and central Africa). High coverage, twice per year, must be achieved in each targeted country. In Senegal, following results were reached in 2006 :</p> <ul style="list-style-type: none"> - 98 % of vitamin A supplementation coverage with the first round among children aged 6 months to 5 years and 97% for de-worming among children aged 1 to 5 years. Strategies used were Local Supplementation Days and Child Survival Days (May/June 2006). - 91% of vitamin A supplementation coverage for the second dose during measles Campaign organized in Senegal from October 30 to November 05, 2006. Senegalese children aged 1 to 5 years have also received mebendazole as part of an integrated child health package with 96% of coverage. 															
Table 4: (cont'd.) Micronutrient Supplementation:															
	Micronutrients														

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	Iodine	Iron	Folate	Zinc	Calcium	Vit A	Vit B-12	Vit C	Vit D	Vit B-1	Vit B-2	Vit B-3	Vit B-6	Vit K	Vit E
Activities Cont.															
Equipment/Supplies						X									
<p>HKI provides a great support to organize Local Vitamin A Supplementation (VAS) Days for the first doses VAS (2006) for children 6-59 months. Thus, for Local Vitamin A Supplementation Days HKI provides support to 19 districts through a "Minimum Support Package" identified in close collaboration with the Food, Nutrition, Child Survival Division (Ministry of Health and Medical Prevention). The "Minimum Support Package" is based on priorities of interventions sectors for VAS (<i>reproduction of monitoring tools, training, Communication/social mobilization, motivation of communities' voluntaries, supervision</i>).</p>															
Supplement's Primary Distribution															
Through Public Channels		X	X			X									
Activities are implemented in close collaboration with the health system at all levels (central level with the Nutrition, Food and child survival Division, regional et district levels in collaboration with Health Management Teams and communities)															
Through NGOs		X				X									
NGOs locally provide their support in implementing vitamin A supplementation strategy.															
Through Private Channels						X									
Private health clinics is involved on VAS through routine.															
Monitoring of routine vitamin A supplementation has been integrated into the National system of Sanitary Information. Tally-sheet are used to provide coverage during Local Vitamin A Supplementation Days.															
Supplementation Targeted Groups															
Women						X									
Women in postpartum are targeted with vitamin A supplementation program in Senegal (two 200 000 UI dose after delivery). The last rapid assessment coverage survey conducted by HKI showed that 53% of women in post partum are supplemented by the routine system															
Children 6-24 months of age						X									
Children 6-24 months are targeted for vitamin A supplementation program in Senegal															
Children 2 – 5 yrs of age						X									
Children 2 – 5 years are targeted in vitamin A supplementation program in Senegal															
Children in school						X									
Primary school children are targeted in pilot or local interventions in Senegal															

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Table 6: Other Public Health Intervention Links

Geographic area(s) covered by this table	Dakar and Ziguinchor regions														
Project Name	Nutritional Support for People leaving with HIV														
Supporting Agencies	USAID's Office for Food for Peace, through a sub-grant from Catholic Relief Services.														
Approximate # of beneficiaries	2350 (Dakar et Ziguinchor)														
	Micronutrients														
	Iodine	Iron	Folate	Zinc	Calcium	Vit A	Vit B-12	Vit C	Vit D	Vit B-1	Vit B-2	Vit B-3	Vit B-6	Vit K	Vit E
Activities															
HIV/AIDS		X				X									
<p>In order to reinforce nutritional support for People Living with HIV/AIDS (PLWHA) in Senegal, HKI, in close collaboration with the Task Force HIV/nutrition, initiate et develop an integrated package of nutrition services (<i>PISEN is the French acronym : Paquet Intégré de Services Essentiels de Nutrition pour les PVVIH</i>). Thus, services providers use existing contacts to provide nutrition services. De-worming, Iron supplementation and vitamin A supplementation were integrated in the nutrition package of services. This approach has been adopted in Senegal as national strategy for nutritional support for PLWA.</p>															