

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

Table 1: Demographic Information

Reporting Individual	Anatoli Rugaimukamu
Institution/Organization	World Vision Tanzania
Contact address (Email)	Anatoli_rugaimukam@wvi.org
Position	Project Manager
Department/Section	Centres of Excellence Project & Small Scale Fortification Project
Major focus of activities	Support to others, Programming/Interventions
Summary of activities	<p>The Centres of Excellence Project aims at addressing micronutrient deficiencies through supplementation, dietary improvement, building community capacity to implement activities to control micronutrient malnutrition at the household level, and through partnership with local government departments and academic institutions.</p> <p>The Small Scale Fortification Project contributes to the reduction of micronutrient malnutrition by improving access to vitamin and mineral fortified maize flour for women & children. In addition to promotion of and training for maize flour fortification, the project is working with pre-mix user groups to move towards a cost-recovery model for sustainability.</p>

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

Geographic area(s) covered by this table	3 Area Development Programmes (ADPs) in Handeni and Korogwe Districts, Tanga Region, Tanzania														
Project Name	1) Centres of Excellence Project (CE) 2) Small Scale Fortification Project (SSF)														
Supporting Agencies	World Vision Canada														
Approximate # of beneficiaries	1) CE: Women, children and other community members in 3 ADPs 2) SSF: 1105 households														
	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															
Training/Capacity Building		X	X	X	X	X	X	X		X	X	X			
<p>1) For CE, village health workers, village health committees were trained in the importance of exclusive breastfeeding and appropriate infant and young child feeding practices; nurses and ward health officers were trained as trainers of growth promoters</p> <p>2) For SSF, community members were trained on maize-flour fortification and 31 Pre-mix users' groups were formed to develop cost-recovery mechanisms. A sustainability strategy will be developed in 2007.</p>															

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Table 3: Food Fortification

Geographic area(s) covered by this table	3 Area Development Programmes (ADPs) in Handeni and Korogwe Districts, Tanga Region, Tanzania														
Project Name	Small Scale Fortification Project														
Supporting Agencies	World Vision Canada														
Approximate # of subjects or beneficiaries for each project described	1105 households														
	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
<u>Commodities</u>															
Maize		X	X	X	X	X	X	X		X	X	X			
<u>Activities</u>															
Policy and Advocacy		X	X	X	X	X	X	X		X	X	X			
This project participates in the National Advocacy Workshop on food fortification															
Provision of Fortification Supplies		X	X	X	X	X	X	X		X	X	X			

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Table 4: Vitamin and Mineral Supplementation

Geographic area(s) covered by this table	3 Area Development Programmes (ADPs) located in Handeni and Korogwe Districts in Tanga Region, Tanzania														
Project Name	Centres of Excellence Project														
Supporting Agencies	World Vision Canada														
Approximate # of subjects or beneficiaries for each project described	Vitamin A: 48,000 children under five; 1,100 post-partum women Iron: 2,800 children under 5; 1,300 women of child bearing age; 2,100 pregnant women														
	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			x									
The Centres of Excellence Project aims at addressing micronutrient deficiencies through supplementation, dietary improvement, building community capacity to implement activities to control micronutrient malnutrition at the household level, and through partnership with local government departments and academic institutions															
Activities Cont.															
Supplement's Primary Distribution															
Through Public Channels		x	x			x									
Vitamin A supplementation for under 5s and women was accomplished through collaboration with the Ministry of Health during National Immunization Days and on a routine basis at health facilities Iron supplementation for women of childbearing age and pregnant women was done through government health facilities, outreach & MCH services.															
Supplementation Targeted Groups															
Women		x	x			x									
Post-partum women were given VAC within 8 weeks after delivery Women of childbearing age were supplemented with iron and folic acid															
Pregnant women		x	x												
Pregnant women were supplemented with iron and folic acid															
Children 6-24 months of age		x				x									
Children 2 – 5 yrs of age		x				x									

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Table 5: Dietary Diversity to Improve Micronutrient Nutrition

Geographic area(s) covered by this table	3 Area Development Programmes (ADPs) located in Handeni and Korogwe Districts in Tanga Region, Tanzania														
Project Name	Centres of Excellence Project														
Supporting Agencies	World Vision Canada														
Approximate # of subjects or beneficiaries for each project described	Vitamin A: 48,000 children under five; 1,100 post-partum women Iron: 2,800 children under 5; 1,300 women of child bearing age; 2,100 pregnant women														
	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															
	<i>Other areas using diet improvement to improve micronutrient nutrition</i>														
	Promotion of exclusive breastfeeding (EBF) and appropriate complementary feeding through health education given during community meetings and MCH outreach services; village health workers and health committees received training on the importance of EBF.														

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Table 6: Other Public Health Intervention Links

	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															
<i>Hookworm Control</i>		X		X		X									
Children under five & school-aged children received de-worming medications															
<i>Malaria Prevention and Control</i>															
Public meetings were conducted in 30 villages to reinforce the habit of using ITNs in the project communities. Monthly house-to-house visits were conducted to remind community members to use ITNs and to treat the nets regularly.															
<i>Polio/Immunizations</i>															
The project support immunization services by supporting outreach to hard-to-reach areas.															
<i>School Nutrition/Health Programs</i>															
Good hygiene practices were promoted among schoolchildren through school health clubs															
<i>Other (list)</i>															
Good hygiene practices, e.g. proper use of latrines, rubbish pits and kitchen utensil racks, were promoted. House-to-house visits were conducted to reinforce sanitary behaviour.															