

Distribution of LNS in a refugee camp: Lessons learnt

Gloria Kisia

Back-ground

Dadaab camps, Kenya

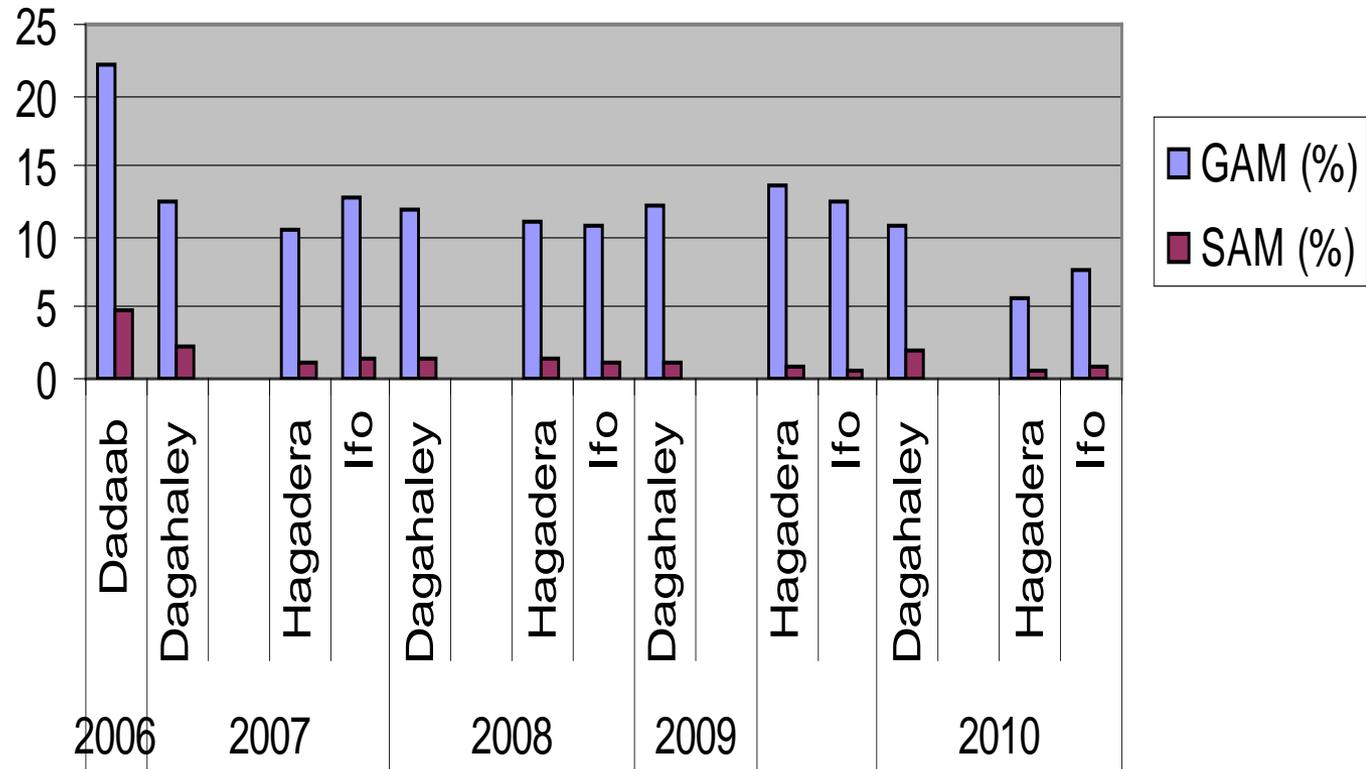
- Total Population in 2009 : 250,000
- Under two's – 15,000

Current population- 380,000

Scenario:

- High anaemia levels- 70%
- High GAM levels- 12% (classified serious)
- Medium stunting levels- 28%
- Existing GFD ,SFP, OTP, IYCF program

Malnutrition trends-Dadaab



Distribution plan-phase 1

- Roles and responsibilities of stakeholders

UNHCR- procurement, distribution costs, target group, selection criteria, monitoring

CARE-warehousing

Health partners- sensitization, distribution, training, nutrition education, outre and monitoring

Community leaders- communication and sensitization

- Logistics- transport and storage

- Distribution system

- Distribution sites, staff, equipment, tools

- Pilot distribution

Distribution Process

- Stage 1: Verification of manifest
- Stage 2: Health education at waiting bays
- Stage 3: Registration
- Stage 4: Growth monitoring and promotion
- Stage 5: Issuing of nutriutter
- Stage 6: Post distribution monitoring (tool)

Photos





Other issues considered

- How to deal with those missing from manifest?
- Cut-off date for inclusion?
- What is required from the beneficiaries?
- Distribution dates?
- Mobilization and call-in strategy?

IEC material



Outcomes of phase 1

- High distribution coverage - > 90%
- Improved GMP Coverage- from 30 to 65%
- Complementation of active case finding-
increased referrals
- *'Reduced anaemia?'*

Challenges

- Congestion at distribution centres
- High demand for the product thus security concerns
- Staff overwhelmed by numerous activities affect quality of GMP
- Age determination and missing in manifest
- Increasing the target group to avoid product expiry

Program readjustment- Phase 2

- Re-scheduling of the distribution- routine activity (schedule)
- Sensitization and sharing of calendar
- Hiring of permanent staff
- Expansion of distribution facilities
- Enhanced GMP component- equipment, registers, training
- Sensitization on new package

Outcomes of phase 2

- Program well integrated
- Reduced waiting time
- Quality time for nutrition education and counselling for IYCF

Current challenges

- Increased sharing- new arrivals

Emerging issues

Determination of impact??