IMPROVING ACCESS TO COMMUNITY FOOD AND NUTRITION SYSTEMS FOR PEOPLE LIVING WITH HIV: AN ILLUSTRATED ASSESSMENT OF FOOD AND NUTRITION INTERVENTIONS IN HIGH FOOD INSECURE REGIONS OF KIAMBU, KENYA

Akulima M[1], Ikamati R[1], Mungai M[1], Muhula S[1], Karanja S[1]

[1]Amref Health Africa in Kenya

BACKGROUND

- There were estimated 236,548 People Living with HIV (PLHIV) in Central/Eastern Kenya in 2013
- Kiambu County had 46,656 PLHIV; 42,400(91%) adults and 4,200(9%) children aged 1-14 years. PLHIV stay in vulnerable households with limited access to food and chances for good health
- We implemented integrated community food security and nutrition interventions targeting 200 households for 1233 PLHIV
- The interventions included drought resistant crops and livestock, food banking, linkages for therapeutic feeding, vegetable drying, and storage with products value-addition and standards certification
- The objective of this study was to assess the performance of food security and nutritional interventions implemented through 8 Quality Improvement Team (QITs).

Fig 1: A foodbank in Ngoliba

METHODS

- A retrospective cohort study conducted between January 2015 and August 2016
- Child Status Index (CSI) tool collected data on the number of households with access to at least two meals per day (average |>20days per month)
- QIT journals provided descriptive information on monthly food security interventions (change ideas)
- The Run Chart (Time series Matrix) and Probability Matrix were applied to analyse the changes in trends in food access at household levels.

RESULTS

- CSI data showed that at pre-interventions; 98% of 200 households ate on average 1meal per day
- In 20 months period; 75% out of 90% target of 200 households were now accessing at least 2meals per day
- The Run Charts showed 20 data-points (Months), Median (87.5) with 7 runs across median line for probability range (6-16 Runs) at 5% risk level
- Run Charts showed increasing numbers of households with >2 meals per day between January-April 2015 and between January-August 2016

- The number of data-points trends, runs and shifts fulfilled Run Chart rules for validating changes and measuring performance of food interventions.

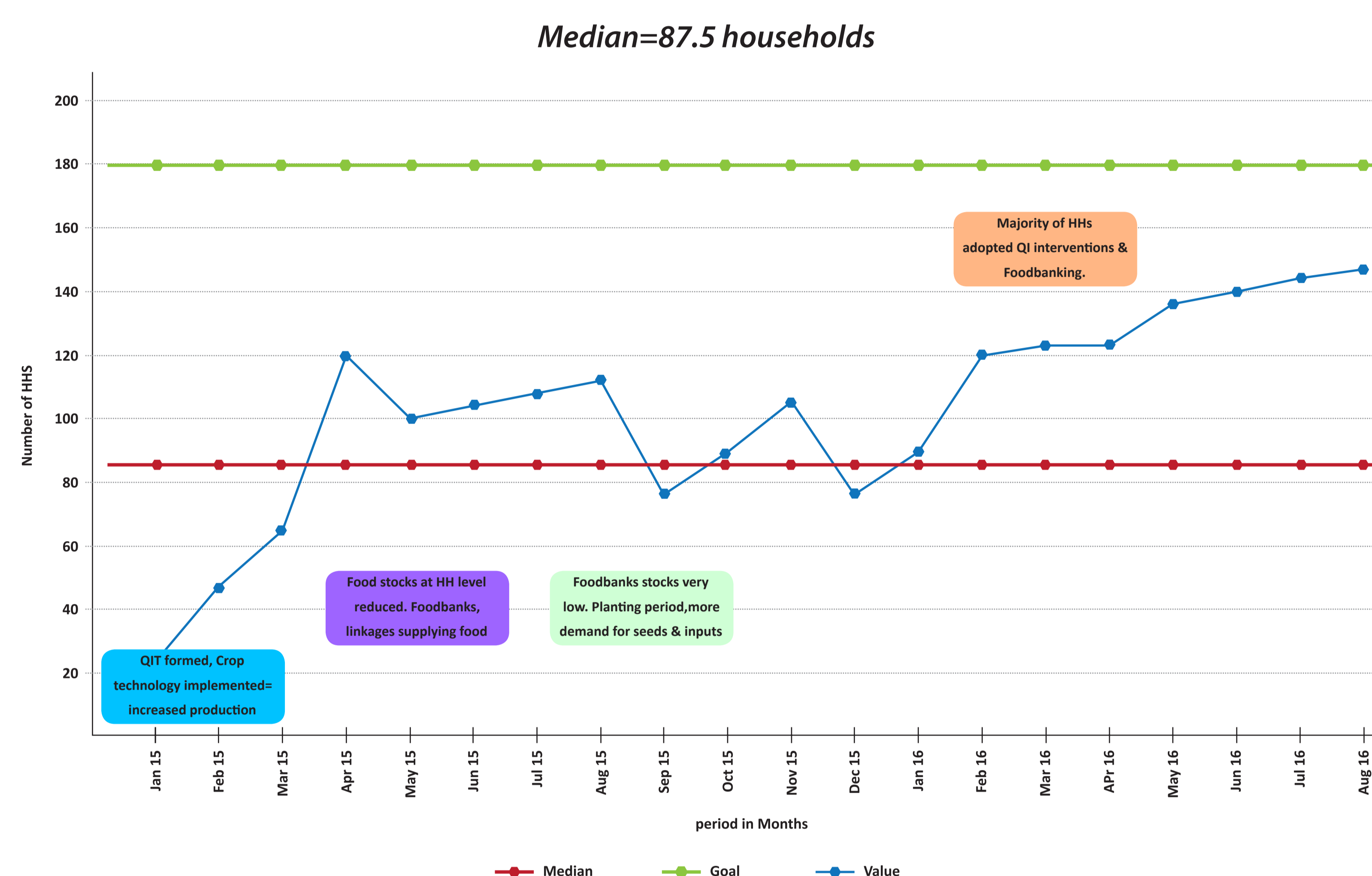*Goal: 90%(180) of targeted Households have access to and eat atleast 2 meals per day by June 2016*
Median=87.5 households

Fig 2: Ngoliba Quality Improvement Team Number of HHs having atleast 2 meals per day

Fig 3: Food systems interventions validation table

CONCLUSION

- There was improvement in households' access to food with the proportion of households accessing at least 2meals per day increasing
- This suggests that integrated food and nutrition interventions through QITs contributed towards attainment of the food access goal
- QITs are imperative structures in addressing food system challenges
- Community partnerships need to adopt QITs structures in strengthening food and nutrition systems at community level.

ACKNOWLEDGEMENT