



World Food Programme

## PAKISTAN

### Monthly Operational and Monitoring Report AJK Rural Support Program

Province: AJK  
Month: February, 2014  
PRRO-200250

#### WFP AJK At a Glance: February, 2014

Target Districts	Muzaffarabad, Huttian, Neelum & Haveli
Humanitarian Hubs	
Camps	
Other Distribution Points	75
Cooperating Partners	AJKRSP
Staff (International : National)	

#### **HIGHLIGHTS**

- Screening process continued in four districts and during month of February 11439 children and PLWs was examined.
- A total of 107,571 cases have been screened so far in which 25067 PLWs and 82504 children were examined.
- Out of total cases examined, 14500 PLWs and 24800 children found malnourished.
- During reporting month a total of 5034 MAM children including 409 newly registered have been distributed food where as number of siblings reduced to 2973.
- Hence, a total of 15.138 MT food distributed during the month of Feb 2014.
- The formation of support groups has also progressed. A total of 156 support groups including 26 newly formed during reporting month have been involved in dialogues and sessions with communities.
- Similarly, general orientation and awareness raising of the community at large remained another important activity during the reporting month in all targeted districts. These sessions were organized with community activists, community elders, beneficiaries including women and children. The basic purpose was to make aware the community about project objectives, existing issues in their areas related to malnutrition and their causes, promoting healthy nutrition practices to prevent the trend of malnourishment in their respective communities. In this connection a total of 156 sessions were conducted in four districts including 30 sessions in district Huttian, 55 in Muzaffarabad, 40 in Neelum and again 31 in district Haveli.

## Situation Overview

As of February, 2014, a total of 107571 Pregnant and Lactating Women (PLW) and children have been examined for their nutritional status including 25067 PLWs and 82504 children in four targeted districts. Out of total screened cases, 14500 PLWs and 24800 children were found malnourished which indicates a higher ratio of malnutrition in targeted areas. Similarly, during February, 2014, after having treatment, a total of 3677 children have been discharged from the program. In which 3651 MAM have cured while the rest remained non-recovered which indicate 98% of cure rate as of end of February, 2014. At probing the reasons for non-recovered cases, it has been noted that in most of these cases, beneficiaries did not use the food properly while a few were those who were suffered with certain medical complications.

This is also important to mention that the screening figures above have been achieved through door to door visit in all the four targeted districts. Yet, around 80% areas of all the four targeted districts, has been covered under screening process. The rest of the area will be covered in coming months. In this backdrop, the situation above evidently illustrate that the young children and women are among the most vulnerable groups from nutritional point of view in AJK and moreover under-nutrition is one of the main causes of death among infants and young children in the targeted areas. The observations from the field also depict that among the under-nourished children who could survive have always been with comparatively less competence to learn and gain education which eventually harms their productivity at adulthood, thus effect performance at all stages of their life.

Therefore, Community Based Management of Malnutrition (CMAM) project which well directs all its focus at mother and young children certainly provides a window of opportunity to get them out of the vicious circle of malnutrition. Provision of nutritious food along with education and awareness to promote healthy nutritional practices are the prime activities are focused under the project those are truly proved to be helpful for children and their mothers in the target areas to prevent and cure themselves from malnutrition.

## Progress Updates

Progress for the month of February is given in the table below:

District	Beneficiaries			Food (MT)			Remarks
	Planned	Achieved	% achievement	Planned	Distributed	% achievement	
Muzaffarabad	3300	2233	60	4.95	4.603	92	
Neelum	1750	1444	82	6.563	5.226	79	
Huttian	1130	715	63	3.39	2.902	85	
Havali	1000	642	64	3.75	2.408	64	
<b>TOTAL</b>	<b>7180</b>	<b>5034</b>	<b>70</b>	<b>18.653</b>	<b>15.138</b>	<b>81</b>	

### **Operational Issues**

The areas (Upper part of Neelum Valley, Haveli and Leepa Valley) those received heavy rain and snow fall during the reporting months, remained tough to access in terms of monitoring and food distribution. Other than this, all the operational matters in respect to execution of field activities have been smooth during the month of February, 2014. AJKRSP has been successful to undertake well in time all operational arrangements regarding food handling and transportation and arrangement of vehicles in the field.

Deduction of HEB from food package is resulting in misusing of food as siblings those are not provided with HEB share wawamum/achamum. Although field staff of AJKRSP is counseling caretakers to ensure proper utilization of food.

Stationary is not sufficient at SFP sites. Screening register, registration register, ration cards are especially require on immediate basis. Meanwhile AJKRSP is managing stationary by using photocopies.

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### **MONITORING FINDINGS**

AJKRSP consistently involves community networks, community elders and the beneficiaries to regularly oversee and monitor the field activities. In addition to this, the combined field visits of AJKRSP monitoring staff along with representatives from health departments are facilitated on frequent basis so as to seek in time technical guidance and strengthen the process of cross verification and confirmation of achievements. For this purpose, a series of review meetings are also organized at BHUs, district and national level to get regular feedback from all stakeholders so that in case of any deviation, the timely corrective measures could be taken to keep the project on track.

Following are the key findings have been observed during the month of February, 2014:

- Due to harsh weather particularly in snow covered areas, children have commonly been observed suffering from diseases like cold and fever which can affect their health status in the weeks to come.
- While calculating the cure rate of those beneficiaries who received their last month food, we found out that the average cure rate remained 98%.
- Similarly, at inquiring the reasons for non-cure, it was found out that the most number was of those who were suffering from medical complication, and then those who did not took the food regularly.
- There is a higher ratio of malnourished children and their mothers exist in the target area. Therefore, observed louder voice in the field in the favor of type of the activities like Community Nutrition Program.
- The ratio of MAM children found higher in the field while the proportion of SAM children remained low in the targeted area. So far only 750 SAM children found out of total screened cases in the four targeted districts.
- The project activities have seen greater level of accessibility and support from the target community.
- The ratio of female malnourished children is higher than the male. This is mainly due to existing of a general traditionally discriminative caring attitude toward female children.
- In the target area, community generally feels comfortable with female staff members to carry out the measurement activities particularly in the case of PLWs.
- The strategy to access the target groups through the support of existing community networks remained very instrumental and effective.

- The beneficiaries who received food during the reporting month expressed higher level of satisfaction to the distribution process, particularly, to the way the distribution of food is organized close to their village at BHUs.

#### **OPERATIONAL PLAN: [March, 2014]**

District	Total Beneficiaries		Total	Total Food Requirement (MT)
	MAM	PLW		
<b>PRRO 200250</b>				
Muzaffarabad	995	-	995	1.49
Hattian	347	-	347	0.52
Neelum	821	-	821	1.23
Havali	595	-	595	2.23
<b>Total</b>	<b>2758</b>	<b>-</b>	<b>2758</b>	<b>5.48</b>

#### **Summary of District Wise CNP Initiative (SFP/OTPs) February, 2014**

District	Planned SFPs	Functional SFPs	Planned OTPs	Functional OTPs
Muzaffarabad	33	33	-	-
Neelum	23	20	-	-
Huttian	12	12	-	-
Havali	10	10	-	-

#### **Case Studies/Pictures**

## Malnutrition is Treatable

### A Moderately acute Malnourished Child Story

Community Nutrition Program in AJK is heading toward its objective through efficient implementation of AJKRSP under technical backstopping of WFP. The acceptability of program is wide spreading because of its short coming impact. Above 90% of children those had been registered in previous months have recovered from malnutrition. The prominent Improvement in malnourished children inspired surrounding community to look after their children.



During screening in district Hattian Bala, BHU Chinnari team identified a malnourish case in month of December. It was Areesha a 48 month child who was not able to walk for a little distance due to weakness. After anthropometry she was included in SFP with MUAC 11.9 cm. Her mother claimed that she is growing three more children with Areesha and she is widow. There is no source of income she added. She expressed her fear about Areesha health.

Areesha was admitted in SFP on 24<sup>th</sup> December and provided with supplementary food. Nutrition assistant at BHU Chinnari did counseling of Areesha mother and shared problem with her. She was also given soft messages about care of her child. Areesha stayed in program for three months. She was brought to BHU twice after admission for examination and to receive monthly food. In three months field team also carried out follow up visits to gauge Areesha. After three month, Areesha recovered and discharged from program. At discharge time her MUAC was taken 12.6 cm.



In response of Areesha remarkable recovery, her mother and sister expressed that now Areesha is able to move from one place to other and she could play with her siblings as well. They are very glad to see Areesha active and energetic. Her mother said that supplementary food provided by AJKRSP and WFP not only improved health of my child but also gave satisfaction to me.