

EC Partner

Action Against Hunger
(Spain)

Facts and Figures

- EC Contribution:
€ 600 000 (75% of
the total)
- Duration: 2010 - 2012



EUROPEAN
COMMISSION

Fight against HIV/AIDS

Community capacity building programme in Swaziland

Fighting malnutrition and HIV/AIDS in Swaziland

'At 25.9% (UNAIDS) Swaziland has the highest rate of HIV in the world. Even among children as young as 2-4 years old, 5% of girls and 6% of boys are infected. (Demographic and Health Survey 2006-2007)'.

Martin Bwalya, NEPAD Planning and
Coordination Agency (NPCA)

**Context**

Swaziland is having serious difficulties in meeting a number of Millennium Development Goals, due in part to the high rates of HIV & AIDS and food insecurity. Action Against Hunger (ACH) is supporting the Swaziland National Nutrition Council in the creation and implementation of a national protocol for the integrated management of acute malnutrition and in the set up and monitoring of a therapeutic feeding treatment for children with acute malnutrition. ACH is acting as a facilitator in the programme, strengthening the capacity and awareness among civil society, local authorities and the Ministry of Health, in order to increase early identification and referral of malnutrition and to improve feeding practices.

Objectives

- The overall objective is to reduce death rates linked to malnutrition and HIV in the Lubombo and Shiselweni regions.
- The project purpose is to improve the identification of malnutrition and knowledge of nutrition related to HIV and AIDS.

Impact

- 140 training sessions have taken place with 4 234 participants.
- 221 screening sessions have taken place from July 2010 to April 2011, 5 214 children have been screened.
- 81 awareness raising sessions have improved 2 905 participants knowledge of nutrition issues related to HIV.
- 648 home visits to sick people have taken place from July 2010 to April 2011.
- Increased early identification of malnutrition cases and increased awareness of HIV and nutrition services available in the area.

Fight against HIV/AIDS

Community capacity building programme in Swaziland

Fighting malnutrition and HIV/AIDS in Swaziland

Make Dlamini works in her community as part of the Shiselweni Reformed Church Home Based Care programme. She attends the sick and disabled members of the community, visiting them in their homes and providing basic care in order to help them through their illnesses and improve their quality of life.

Make Dlamini attended training conducted by Action Against Hunger, in partnership with the Swaziland National Nutrition Council and funded mainly by the European Union. During the training she learnt about basic nutrition and how to plan a meal using seasonal locally available foods. For example, in December, she might suggest umkwakwa, beetroot and ligusha with peaches for a snack. She learnt about the vulnerabilities of people with HIV to malnutrition and about the treatment that is offered to malnourished children in the clinic in her area. She also learnt about the importance of good nutrition during pregnancy and breastfeeding, and how and what to feed a young child in order to enhance growth and development.

She has been able to use this information in her work as a home based carer. As she visits her patients in their homes she counsels them on their nutritional needs, and screens the children in the household for malnutrition, referring them for treatment when needed.

She is then able to give her patients advice about managing the symptoms of their illnesses or the side effects of the medication they are taking and direct them to health facilities for further HIV or nutritional care. Many of her patients have TB or HIV and are in need of the valuable information that Make Dlamini has learnt.

In 2010 through the EU-funded community capacity building programme, there were 4 194 community level volunteers trained like Make Dlamini, including rural health motivators, home based carers, Neighbourhood Care Points caregivers and local NGO partners. Those who have been trained have also conducted 59 screening sessions, visited nearly 200 homes and sensitised 718 community members.

The work at the community level is done in collaboration with local leadership and other organisations working in the area.