Survey Findings Prompt Action to Improve Admission and Default Rates for Children with Severe Acute Malnutrition

In Ghana, one objective of the Food and Nutrition Technical Assistance III Project (FANTA) was to introduce and integrate community-based management of acute malnutrition (CMAM) into the country’s health services. After CMAM was integrated into health services at several learning sites, a review by FANTA discovered that although geographic access to services was improved, several health facilities reported low admission of children with severe acute malnutrition and high default rates. To explore this problem, FANTA provided technical assistance to the Ghana Health Service (GHS) to build their capacity to conduct CMAM coverage surveys to better understand barriers to service uptake.

The results and recommendations provided by FANTA from a coverage survey done in Ghana’s Ashaiman Municipality in July 2013 empowered the municipal health management team to take action that led to significantly improved CMAM admission and default rates.

Training and Data Collection

To prepare for the coverage survey in Ashaiman Municipality a core group of regional and national health care providers and managers were trained on survey methods, with FANTA providing technical support in collaboration with UNICEF/Ghana. The coverage survey, which was developed using FANTA’s “SLEAC/SQUEAC” technical reference on evaluating access and coverage of services, included both quantitative and qualitative methods. Through field data collection, children with severe acute malnutrition were identified in targeted communities, and if a child was not receiving treatment, questions were asked to understand why. Key informant interviews and focus group discussions were held with community members, mothers, caregivers, and health care providers to understand the barriers and facilitators to accessing treatment for severe acute malnutrition. Health facility CMAM service delivery data for the past year was also reviewed to understand trends in admissions, default, and death.

Survey Results

The coverage survey results in Ashaiman Municipality confirmed low levels of admission (less than 30 percent of children with severe acute malnutrition were receiving CMAM services at the time of the survey) and high default rates (as high as 85 percent in some facilities).

Results from a coverage survey conducted in Ashaiman Municipality with technical assistance from FANTA prompted actions that resulted in 88 new cases of severe acute malnutrition being found and admitted to care programs.

Admission Trends

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Through analysis of the data, major barriers to accessing services were identified. These barriers included stigma commonly associated with acute malnutrition and limited understanding among community members of malnutrition and where to seek treatment. It was also suggested that innovative case-finding is needed in the absence of community volunteers for CMAM services, which is often lacking in peri-urban settings. FANTA presented recommendations for the municipality to create better awareness of malnutrition and to improve CMAM services, and also provided national-level recommendations to sustain and increase accessibility of CMAM services to community members.

**Taking Action**

Using the barriers and facilitators identified from the survey, the Ashaiman municipal health management team developed a plan of action, which received funding from the U.S. Agency for International Development’s Ghana Focus Region Health Project. Several activities recommended by FANTA and the municipal health management team were implemented. For example, to help raise awareness, the health management team and health care providers reached out to community leaders; held community gatherings; and met with traditional and spiritual healers, women’s associations, and religious groups to discuss the symptoms and treatment of severe acute malnutrition and encouraged individuals to refer cases to health facilities for treatment. The municipality developed a video to show in public facilities such as the hospital outpatient department and developed brochures on the causes of severe acute malnutrition, how to identify signs and symptoms, and where to seek treatment and care. To help address default rates, CMAM refresher courses were offered to community health workers to improve their skills in case-finding and follow-up.

Since the implementation of these activities, 88 new cases of severe acute malnutrition were found through active case-finding activities and were admitted to care programs in Ashaiman. The default rate was drastically reduced, from 60 percent in July 2013 to 17 percent in September 2013. Moving forward, the municipality will continue to support the activities with funding from the Government of Ghana and other development partners. In addition, several of the survey trainees went on to conduct coverage surveys in other regions in Ghana, with support from UNICEF.

FANTA’s training in Ashaiman not only helped to build the capacity of GHS to conduct coverage surveys but also empowered them to use survey data to take steps to improve admission and default rates. As demonstrated by the actions taken in Ashaiman, knowledge and data can be powerful tools to leverage resources and stimulate change.

**Learn more**

Go to www.fantaproject.org to access the Ashaiman Municipality coverage survey report and recommendations.

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