

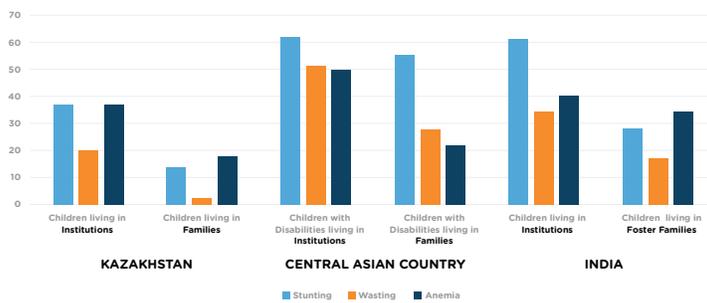
FEEDING & NUTRITION INTERVENTIONS



THE NEED

Children living in institutions and children with disabilities suffer from malnutrition at an alarming rate. SPOON's work across 15 countries has uncovered rates of malnutrition in institutions as high as 91% and has revealed that children with disabilities often experience rates of malnutrition even higher than their peers. A variety of interrelated factors at the household, institution, community, and systemic levels contribute to poor nutritional status for these children. There is also a lack of resources and tools to train caregivers and communities to conduct regular assessments and provide appropriate care. As a result, these children are subjected to dangerous feeding practices and their malnutrition often goes unidentified and unaddressed, leading to illness, compromised development, more severe disability, and premature death. This combination of increased risk and lack of resources results in significant barriers for children with disabilities to remain in their families, and for children in institutional care to reintegrate back into their communities.

PREVALENCE OF STUNTING, WASTING, AND ANEMIA IN CHILDREN LIVING IN INSTITUTIONS AND CHILDREN LIVING WITH FAMILIES



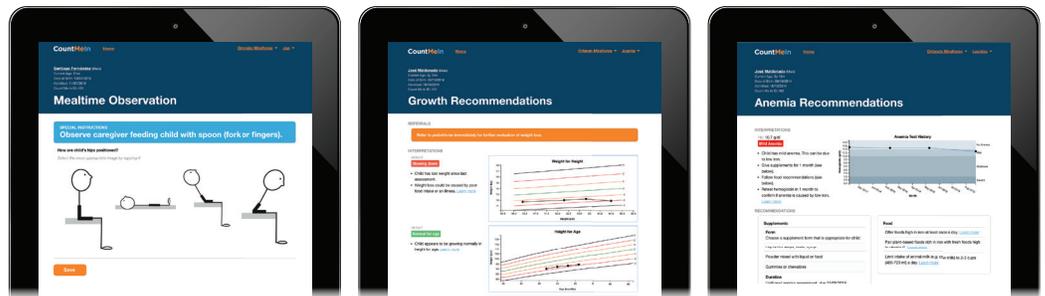
OUR SOLUTION

SPOON designs tools and trainings specifically tailored to reach and improve the lives of vulnerable children, and partners with local organizations and government ministries to disseminate our interventions. We utilize a Training-of-Trainers approach and a digital health intervention, *Count Me In*, to build the capacity of local communities and institutions to intervene in three core areas: feeding practices, growth monitoring, and anemia screening and prevention.

OUR METHODS AND TOOLS

Our mHealth app, **COUNT ME IN**, monitors feeding practices, growth, and anemia status over time and provides individualized interventions and care plans. Through a Training-of-Trainers model, national trainers are equipped with *Count Me In* via smartphones and tablets,

enabling SPOON to scale our programs more widely and effectively. Most critically, *Count Me In* fills a longstanding gap in data collection and data-driven programming for children who are often not counted in global feeding and nutrition programs.



ALL CHILDREN BELONG IN FAMILIES

SPOON believes ALL children, including those with disabilities, have the right to permanent families. Our programs

- eradicate malnutrition for children living in institutions so they have the best chance to join their communities,
- support pathways to ongoing or new family care by empowering families and promoting inclusive community services, and
- collect evidence that makes the case for deinstitutionalization and informs the community of practice regarding successful reintegration.



OUR INTERVENTION MODEL

Our strategy for improving **FEEDING PRACTICES** for children focuses on two main intervention areas: supporting feeding best practices for all children and promoting specialized feeding techniques for children with disabilities. Our tools help identify feeding challenges in areas such as positioning, breast/bottle feeding, and spoon feeding, and our trainings address specialized techniques that improve children's safety, efficiency, and skill-building in feeding.



GROWTH MONITORING allows service providers to diagnose and address malnutrition early and determine if children are responding to nutrition and feeding interventions. SPOON works closely with local partners to implement a growth monitoring system for children under five and for children with disabilities. This includes measuring growth (i.e., weight, height or length, head circumference, mid-upper arm circumference) on a standard schedule, comparing the child's growth to the WHO's growth standards, flagging concerning growth, and following individualized care plans. These care plans include feeding and dietary interventions (e.g., nutrient-dense foods, food supplements, specialized feeding techniques), referrals for severe malnutrition and other growth concerns, and scheduling follow-up growth assessments.

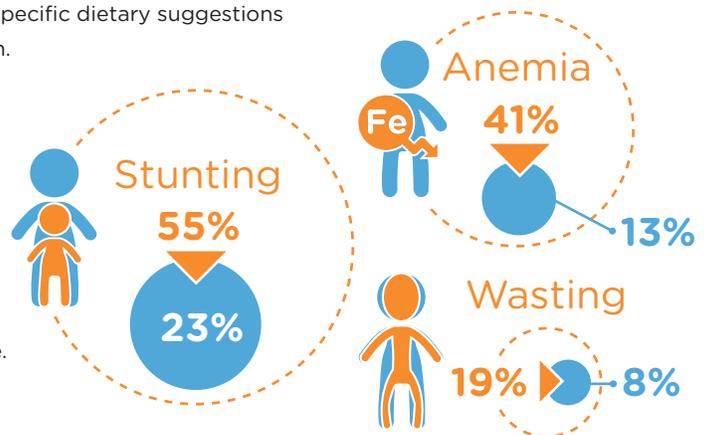


ANEMIA SCREENING is key to combating malnutrition, as iron deficiency is the most widespread nutritional deficiency in the world. Anemia is especially prevalent among children in institutional care and children with disabilities, and it contributes to delayed cognitive development, poor growth, and increased risk of infection. SPOON provides training and guidelines on the prevention, screening, and treatment of iron deficiency anemia. We build the skills of service providers to use minimally invasive techniques and protocols to measure hemoglobin. Those values are entered into *Count Me In* and interpreted based on WHO's cut-off points for mild, moderate, and severe anemia. Our interventions follow local supplementation guidelines and provide context-specific dietary suggestions to promote increased iron consumption and absorption.



OUR IMPACT

SPOON's programs have drastically reduced malnutrition indicators, improved feeding practices for institutionalized children and children with disabilities, and led to country-wide policy change for children in institutional care. In one milestone case, implemented over a two-year period across three countries, we were able to significantly decrease stunting, wasting, and anemia for children in institutions and foster care.



"We never really thought about how we were feeding our children before this program. Now, we have new skills to recognize, identify, and respond better to feeding and nutrition challenges. As we, the carers of children, learn and practice, our children watch and learn too. We are so grateful!"

Nasilele Mulemwa
House of Moses