

Peru Donor Report

Country status

Key Facts of Peru:

Country: 1,285,220 km²

Population: approx. 30 million people.

Per capita income: US\$ 8,940 (Worldbank 2010)

Economic growth: 8.8% (Worldbank 2010)

Political structure: 24 regions, 195 provinces, 1,828 districts

Despite the fact that Peru is one of the best performing economies in Latin America, some populations within the country remain excluded and vulnerable. 31.3% of the country's population lived in poverty in 2010, a decrease of 3.5% compared to 2009. However, over 50% of the population of six regions in the country live in poverty: Huancavelica (66.1%), Apurimac (63.1%), Huánuco (58.5%), Puno (56%), Ayacucho (55.9%), and Amazonas (50.1%).

The International Zinc Nutrition Consultative Group estimates that 41.6% of Peru's population is at risk of inadequate zinc intake, making it one of the high-risk countries. Zinc deficiency can be estimated by indirect indicators such as stunting and diarrhea prevalence. Chronic malnutrition in children under five was reduced from 22.9% in 2005 to 17.9% in 2010. However, disparities between urban and rural areas are still high (10.1% versus 31.3%), and the differences between the richest and poorest quintiles are still significant (2.9 percent versus 35.9%). According to national surveys, there has been no reduction in the prevalence of diarrhea for the last 10 years.

The rates of iron-deficiency anemia may also suggest the risk of zinc deficiency. 50.3% of Peruvian children between six and 36 months suffer from anemia. Iron deficiency affects children across all geographical environments in Peru (rural 56.6%, urban 46.6%), and socioeconomic status (59.4% poorest quintile, 43.3% second-richest quintile).

There are three circumstances that present a unique opportunity to promote the incorporation and scaling-up of effective strategies for the prevention and control of micronutrient deficiency, such as zinc deficiency, and treatment of diarrhea.

1. In August 2009, after two years of advocacy, Peru's Ministry of Women's Affairs and Social Development and Ministry of Health, with the support of UNICEF and the World Food Program, implemented a strategy for micronutrient supplementation in three prioritized regions (Apurimac, Ayacucho, Huancavelica), representing coverage of 101,000 children under three.
2. The Peruvian Government has launched the Integrated Health Insurance System in three regions of the country, through which the Ministry of Health fully subsidizes health care services, including supplementation, provided to poor and extremely poor populations, in particular children and pregnant women
3. The formulation of protected, results-based budgets by the Ministry of Finance, targeted at the Comprehensive Nutrition and Maternal and Neonatal Health Program.

Three-year Program Goals

- Reduce in 15% the stunting in children under three years old in at-risk populations
- Improve by 40% the zinc intake of children under three years old through MNP supplementation and promotion of adequate complementary feeding
- Reduce by 15 % the incidence and severity of acute diarrhea diseases in children under five years old in vulnerable areas, through using zinc supplements
- Reduce by 30% anemia in children under three years old in vulnerable areas through MNP supplementation

Micronutrient Supplementation Strategy

UNICEF Activities

Advocacy to institutionalize a national policy for the prevention and control of micronutrient deficiencies, including zinc:

- Advocacy actions targeted towards the Office of the Vice Minister of Social Development of the Ministry of Women's Affairs and Social Development, and the Office of the Vice Minister of the Ministry of Health to ensure the expansion of the micronutrient supplementation strategy
- Technical assistance and support to the group "No Anemia" to carry out lobbying and advocacy activities targeted towards the Prime Minister, ministerial offices; presidential candidates, regional presidents
- Advocacy with regional and local governments to mobilize resources allocated for the prevention and control of anemia

Strengthening the capacities of health and other social sector personnel to improve the technical and management capabilities of the Ministry of Health and the Ministry of Women's Affairs and Social Development, to ensure micronutrient supplementation, including zinc, for children as part of the correct application of the comprehensive health care package.

- Technical support to prepare a plan for the national scale-up of the micronutrient supplementation strategy
- Regular meetings of the cross-sectoral team to improve the technical criteria concerning the implementation of the micronutrient supplementation strategy

- Training of 954 health professionals from the Apurimac, Ayacucho and Huancavelica regions on prevention and control of micronutrient deficiencies and supplementation management
- Training of 19 Ministry of Health staff as national facilitators for the prevention and control of micronutrient deficiencies in all country regions
- A national workshop on the prevention and control of nutritional anemia including an analysis of zinc and iodine deficiencies targeted the multi-disciplinary teams of 29 regional health bureaus, representing Peru's 24 regions and involving 139 professionals, 22 facilitators and the national technical team.
- Support was given to design and implement the "Goodbye Anemia" strategy led by the municipality of Ventanilla and developed by the health sector, Wawa Wasi program (day care center program for children of six months to four years) and local NGOs. Training was provided to 30 professionals and technicians.
- Capacity strengthening of the Cusco regional health bureau to implement the micronutrient supplementation strategy targeting at-risk children in emergency areas.

Strengthening behavior change communication strategy to promote family practices of micronutrient consumption

- Technical assistance was provided to the Ministry of Health for training of 78 regional facilitators in counseling and demonstration sessions
- At community level, training has been provided to health and local government personnel on MNP supplementation in Apurimac, Ayacucho, Ventanilla; as well as to community agents and families in Apurimac, Ayacucho, Cusco and Ventanilla

Multiple micronutrient powder supply and procurement-related assistance

- UNICEF facilitated the purchase of 1,560,000 units of MNP by the district of Ventanilla
- Technical assistance provided to the National Food Assistance Program to purchase MNP for 16 regions
- Technical assistance provided to Committee for Concerted Action in the Fight against Poverty to prepare a proposal for the Ministry of Health to purchase MNP

Monitoring, evaluation and research

- Technical support to prepare and adjust the monitoring and evaluation plan of the micronutrient supplementation strategy
- Regular technical meetings with the cross-sectoral monitoring and evaluation teams in order to improve technical documents; develop monitoring and evaluation training plans; and to assess the strategy's progress and results
- Technical and financial assistance to monitor the effectiveness of the strategy in the first three regions (Apurimac, Ayacucho, Huancavelica) - based on the data gathered continuously from 29 health centers involving 1,327 children aged six to 35 months during the entire supplementation period (910 completed the six-month follow-up)
- Six-month evaluation meetings with the teams of the regional health bureaus, the National Food Assistance Program, and the Wawa Wasi Program
- Regular follow-up and technical support to regions
- Personnel training and follow-up on the activities of 28 health centers that carry out surveillance activities in the first three regions (Apurimac, Ayacucho, Huancavelica)

MNP Strategy Results

- **Increase in MNP coverage and consumption:** The aim of the supplementation strategy was to make multiple micronutrient powders, including zinc, available to the entire population of children aged six to 36 months living in the Apurimac, Ayacucho and Huancavelica regions, which amounts to over 101,000 children. 90% of children started MNP supplementation; in April 2011 58% received the complete dose of sachets covering six months – sachets to be taken every other day.
 - 60% of the 46,100 children who received the complete dose of sachets consumed them completely; 85% consumed over 80% of the sachets.
 - The use of MNP gives a much better result than the use of ferrous sulphate syrup to combat anemia. Reasons for this are: positive effects of micronutrient supplementation perceived by parents; information received by parents about the importance of MNP; fewer side effects (such as staining of teeth, stomach ache or constipation); easier administration; MNP being more welcomed by children as it does not have the syrup's metallic flavor.
- **Excellent coverage of families receiving information on supplements, especially through advisory support:** 99% of families surveyed received information on MNP; 82% recognized the benefits of the supplement.
- **Reduction of the prevalence of anemia:** In the 910 children who received six months of supplementation between April 2010 and April 2011 the prevalence of anemia was reduced by 27 percent. Changes on a regional level will take more time.
- **Improvement of comprehensive healthcare coverage of children:** The micronutrient supplementation strategy was designed as part of comprehensive healthcare coverage for children. Children receive the supplement in their growth and development check-ups (CRED) and are monitored comprehensively. Families receive counseling and are encouraged to engage in practices to improve children's supplementary diet, among other priority practices. In Apurimac, coverage of growth and development check-ups increased by 35 percent in rural areas and 25 percent in urban areas.

Planning

Based on the results of the first three regions (Apurimac, Ayacucho, Huancavelica), the Ministry of Health and the Ministry of Women's Affairs and Social Development, with the support of UNICEF and the World Food Program, have decided to expand the proposal for micronutrient supplementation to 13 additional regions targeting a total of 424,607 children between six and 35 months of age. The expansion will be undertaken gradually, starting in July 2011 beginning with six new regions. Three more regions will follow in January 2012.

The Ministry of Women's Affairs and Social Development, through the National Food Assistance Program, is procuring the supplement with public resources, as part of its Comprehensive Nutrition Program, which provides food assistance for children under three and pregnant women living in poor and very poor areas.

Zinc Supplementation for diarrhea treatment

UNICEF Activities

Advocacy to institutionalize a national policy to include zinc in the treatment of diarrhea

- Advocacy meetings with Ministry of Health authorities to promote the incorporation of therapeutic zinc supplementation in the treatment of diarrhea
- Meetings with national and regional experts to draft “Clinical Practice Guidelines for the Treatment of Diarrhea and Related Illnesses”
- Meetings with representatives of the regional health bureaus of Ayacucho and Callao (Ventanilla is in the Callao region) about the incorporation of zinc in the treatment of diarrhea. Plans of action for each health bureau have been drafted

Strengthening the capacities of health and other social sector personnel to improve the technical and management capabilities of the Ministry of Health and the Ministry of Women’s Affairs and Social Development, to manage therapeutic zinc supplementation for the treatment of diarrhea

- Training workshops were held on the therapeutic treatment of diarrhea with zinc, aimed at health professionals from the Ayacucho and Callao regional health bureaus involving a total of 155 professionals.

Zinc supplement supply and procurement-related assistance

- Based on the number of reported cases of diarrhea in the first two pilot areas (Ayacucho, Ventanilla) in 2010, 200,000 zinc sulphate tablets were procured. 40,000 tablets were distributed to 4,000 children. The distribution of the remaining tablets is planned for 2011. The purchase for nationwide use will be promoted once the clinical practice guidelines for the inclusion of zinc supplementation in the treatment of diarrhea are approved.

Monitoring, evaluation and research

- The regular information systems of the Ministry of Health have been adapted to incorporate zinc supplementation for the treatment of diarrhea.
- Technical and financial assistance was provided for a study conducted by the Nutritional Research Institute on the effectiveness of micronutrient supplementation with 10 mg of zinc as a preventive measure to reduce the severity and duration of diarrhea. Children between six and 18 months were supplemented over the course of six months from January 2010 to January 2011. The study has been completed and the scientific articles are currently being drafted.

Zinc Supplementation Results

- **Ministry of Health decided to incorporate zinc supplementation for diarrhea treatment:** As a result of concerted advocacy initiated mid-2010, the Ministry of Health has decided to incorporate zinc supplementation as part of the treatment for diarrhea and has included zinc supplementation in the clinical guidelines for child

healthcare. The guidelines have been drafted and are currently being reviewed as part of the approval process.

- **Introduction of zinc supplementation for the treatment of diarrhea in selected areas of the country:** The administration of zinc for the treatment of diarrhoea has begun in 24 health establishments in Ayacucho and Ventanilla. In these areas, there are 45,100 children under five. 5,222 cases of diarrhea were treated in 2010.
 - The program began in March in Ventanilla and in May in Ayacucho. The administration of the supplement to children began at the end of June in Ventanilla and in July in Ayacucho. To date, 40,000 zinc sulphate tablets have been distributed to 4,000 children in Ventanilla district. In all, 200,000 tablets have been procured.
 - This pilot program is intended to identify the critical learnings and improvements to be made in the health system to ensure the effectiveness of zinc supplementation in the treatment of diarrhea. This will be essential for the expansion of the program nationwide.

Planning:

It is expected that by 2012 the administration of zinc tablets for the treatment of diarrhea will be expanded nationwide.

The purchase of MNP for strategic areas, where the government is still not involved, is also expected.