

RELIGIOUS LEADERS, HEALERS JOIN KITAGWENDA'S MALNUTRITION FIGHT

IN PARTNERSHIP WITH...



What children eat in their earliest years shapes survival, learning and future productivity. Yet for many families, nutrition is constrained by habits, misinformation and limited choices. As Uganda confronts persistent malnutrition, there is growing recognition that change requires informed communities and stronger policies. Through a month-long campaign from April to May, *New Vision*, in partnership with UNICEF and the Ministry of Health, is spotlighting the challenges and solutions shaping children's diets and their chances of a healthy start.

By Jonan Tusingwire

Child malnutrition remains a major health concern in Kitagwenda, with new district nutrition data revealing continued cases of severe acute malnutrition, moderate acute malnutrition, and underweight children across several sub-counties and town councils.

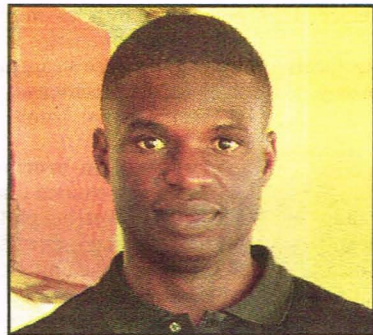
According to the latest nutrition surveillance figures from health facilities in the district, Nyabbbani sub-county recorded the highest number of people screened for nutrition status at 3,869, followed by Kanara sub-county with 2,578 and Kitagwenda town council with 2,510.

The data further shows that females formed the biggest proportion of those assessed. For instance, Kitagwenda town council recorded 9,225 females assessed compared to 4,754 males, while Nyabbbani registered 3,921 females against 2,156 males.

The assessment also revealed



The Kicheche Health Centre III health inspector, Adolf Kiseembo (left), engaging with patients at the health centre. Health workers conduct community dialogues to sensitise residents about malnutrition in the district



Health inspector: Adolf Kiseembo

worrying cases of severe acute malnutrition without oedema, one of the most dangerous forms of child malnutrition.

Bukurungo town council registered the highest number of cases, with 13, followed by Kanara sub-county with 12 and Kakasi sub-county with 10. Buhanda sub-county recorded five cases while Nyabbbani registered six.

Cases of severe acute malnutrition with oedema were also reported in some areas. Kakasi sub-county recorded seven cases, while Kitagwenda town council reported five.

The district additionally registered several cases of moderate acute malnutrition. Nyabbbani sub-county emerged as the most affected, with 55 cases, followed by Buhanda sub-county with 24 cases and Kanara sub-county with nine cases.

Underweight children were also identified in different parts of the district. Bukurungo town council recorded the highest number with 38

ENGAGING PASTORS, TRADITIONAL HEALERS

Mable Tuhimbise, the Kitagwenda nutrition focal person, says the district has launched efforts to involve pastors and traditional healers in the fight against child malnutrition.

She says many families have been taking weak and malnourished children to prayer centres and shrines instead of health facilities, a practice that delays treatment and worsens the children's condition.

"We have carried out several meetings with pastors and witch doctors separately over time. For pastors, we are telling them that instead of praying for these children from their churches, let them refer them to hospitals and pray for them from there," Tuhimbise says.

She adds that although traditional healers need to earn a living, they should quickly refer severely malnourished children to hospitals for proper treatment.

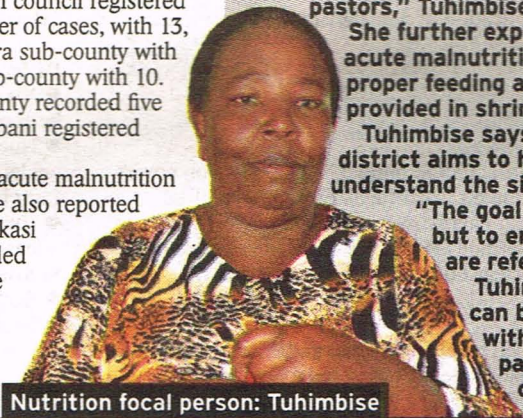
"Ever since we started this, we have observed some improvements. We are currently getting referrals from these pastors," Tuhimbise says.

She further explains that children suffering from severe acute malnutrition require urgent medical attention, proper feeding and specialised treatment that cannot be provided in shrines or prayer centres.

Tuhimbise says through sensitisation meetings, the district aims to help pastors and traditional healers understand the signs and dangers of malnutrition.

"The goal is not to fight pastors or cultural beliefs, but to encourage co-operation so that children are referred to hospitals in time," she says.

Tuhimbise says religious and cultural leaders can become ambassadors for child nutrition within their communities by encouraging parents to seek the necessary medical care in time.



Nutrition focal person: Tuhimbise

underweight cases, while Nyabbbani sub-county registered 19 cases. Kakasi and Kanara sub-counties recorded five cases each.

TREATMENT EFFORTS UNDERWAY

Mable Tuhimbise, the district nutrition focal person, said treatment efforts are ongoing through outpatient therapeutic

care programmes for severely malnourished children.

She said Kanara sub-county registered the highest number of new admissions at 21, followed by Mahyoro town council with 19 new admissions and Bukurungo town council with eight. At the time of the visit, 49 children were enrolled at Mpara Health Centre IV.

However, Tuhimbise said nutrition interventions in the district are being hindered by some pastors and traditional healers.

She said some keep malnourished children in churches for prayers and in shrines for treatment under the belief that the children are bewitched.

Tuhimbise said this has contributed to deaths among some malnourished children, while others have defaulted from treatment. For example, Kanara sub-county recorded four clients who abandoned treatment, while Bukurungo town council registered two defaults last year.

COMMUNITY DIALOGUES INTENSIFIED

Adolf Kiseembo, the health inspector at Kicheche Health Centre III, says health workers are also conducting community dialogues to sensitise residents about malnutrition.

He says six community dialogues are conducted every quarter, translating into 24 dialogues each financial year.

During these engagements, communities are educated about the signs and dangers of malnutrition, the types of foods children should eat, and the recommended diet for pregnant mothers to ensure proper growth and development of their babies.

Health workers have also trained Village Health Teams (VHTs) on how to screen children within their villages to identify malnutrition cases early.

The VHTs are further equipped with skills on how to refer severely malnourished children to health facilities for proper treatment and management.

Kiseembo also revealed that men are specifically engaged during the community dialogues so they can understand their responsibilities as heads of families.

He adds that some men restrict their wives from moving freely, making it difficult for them to attend antenatal care services and community sensitisation meetings.

"We keep reminding men about their responsibilities and how they can support their wives to visit health facilities for antenatal care," Kiseembo says.

SIGNS OF IMPROVEMENT

Innocent Turyasingura, the VHT co-ordinator for Kabujogera town council, says malnutrition cases in his area have reduced due to continuous sensitisation efforts.

He says communities are more informed about proper child feeding practices lately.

"People have information. They know what their children should eat," Turyasingura says.

PHOTOS BY JONAN TUSINGWIRE