

# PMA2020 NUTRITION SURVEY – BURKINA FASO

## Key Results | September 2017



Photo credit: Anouk Delafortrie, EC ECHO

Performance Monitoring and Accountability 2020 (PMA2020) uses innovative mobile technology to support low-cost, rapid-turnaround surveys to monitor key health indicators in 11 countries. The project is implemented by local universities and research organizations, deploying a cadre of female data collectors trained in mobile-assisted data collection. The PMA2020 Nutrition Survey is the first survey to rapidly generate actionable data on nutrition interventions at the national level in Burkina Faso. PMA2020/Burkina Faso is led by l'Institut Supérieur des Sciences de la Population (ISSP) at Université Ouaga I Pr Joseph Ki-Zerbo. Overall direction and support is provided by the Bill & Melinda Gates Institute for Population and Reproductive Health at the Johns Hopkins Bloomberg School of Public Health.

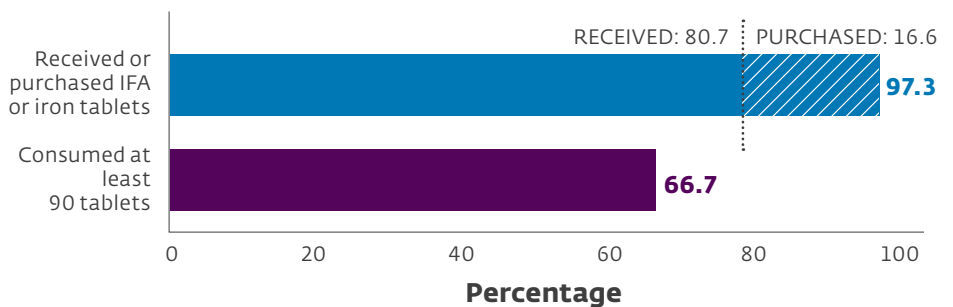
For more information, visit <http://www.pma2020.org>

### NUTRITION INTERVENTIONS FOR PREGNANT WOMEN

Antenatal care (ANC) is the primary delivery platform for nutrition interventions to pregnant women in Burkina Faso.

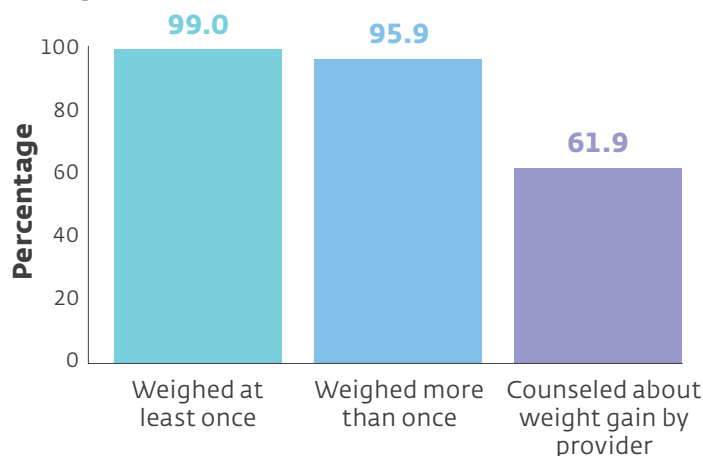
- 97% of recently pregnant women reported attending at least one ANC visit.

#### Receipt and Consumption of Iron-Containing Supplements Among Recently Pregnant Women



Recently pregnant women are defined in this survey as women who had a live birth in the previous 2 years.

#### Monitoring of Weight Gain Among Recently Pregnant Women Who Attended ANC



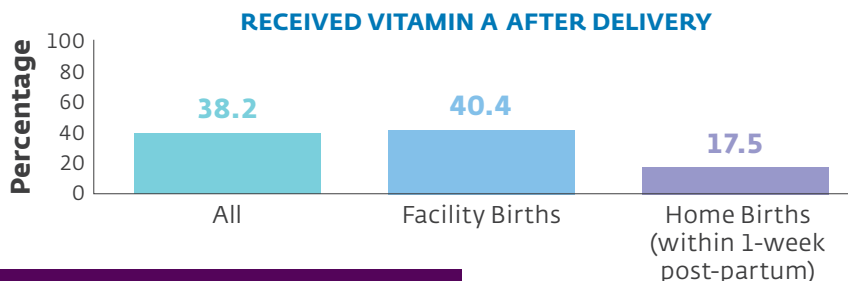
Only 1% of recently pregnant women who were ever weighed during ANC reported receiving food support from a facility or community based program.

## NUTRITION INTERVENTIONS FOR WOMEN AT DELIVERY

90% of recently pregnant women gave birth at a health facility.

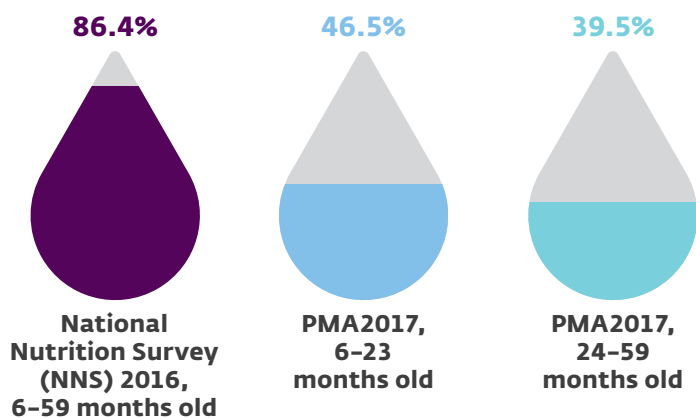
### Receipt of High-dose Vitamin A Supplement Among Recently Pregnant Women

\*Within 1-week post-partum for home births

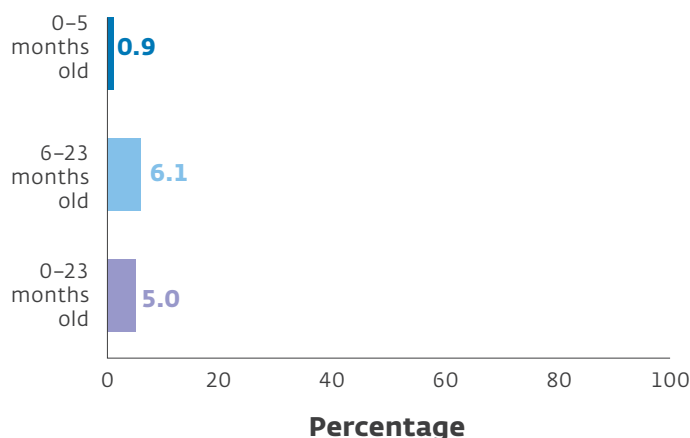


## SELECT NUTRITION INTERVENTIONS FOR CHILDREN UNDER 5

### Children 6–59 Months Who Received a High-Dose Vitamin A Supplement in Previous 6 Months

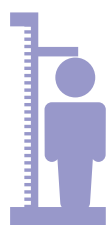


### Children 0-23 Months with Diarrhea in Previous 2 Weeks Who Received Zinc



## Growth Monitoring and Screening for Acute Malnutrition

Children 0-59 months who had height, weight, or mid-upper arm circumference measured in the last 30 days



**28.0%**  
Height in last 30 days



**32.4%**  
Weight in last 30 days



**19.7%**  
Mid-upper arm circumference in last 30 days



**34.3%**  
At least 1 measurement of the 3 in last 30 days

- 13% of caregivers of children 0-23 months old who were measured in previous 30 days, were told their child was malnourished.

- 7% of caregivers of children 6-23 months old, reported receiving a food supplement for treatment of malnutrition.

## Nutritional Status of Children 6–59 Months Old at Time of Survey

|   | NNS 2016            |  | PMA 2017            |                      |
|---|---------------------|--|---------------------|----------------------|
|   | 6–59 months old (%) |  | 6–23 months old (%) | 24–59 months old (%) |
| MUAC <115 mm (Severe Acute Malnutrition)      | 0.4                 |  | 1.1                 | 1.0                  |
| MUAC 115–125 mm (Moderate Acute Malnutrition) | 2.1                 |  | 5.6                 | 1.1                  |

# BREASTFEEDING

## Breastfeeding Counseling and Support at Four Critical Contact Points

### DURING ANC

- 54% of recently pregnant women received information from ANC provider about how to feed their newborn

### AT DELIVERY

- 80% had baby placed on chest or side immediately after delivery to promote early initiation of breastfeeding
- 67% of women received information about feeding their newborn or were observed by a health worker to ensure correct breastfeeding technique

### AT POSTNATAL VISIT WITHIN 30 DAYS OF DELIVERY

- 40% of women received information about feeding their newborn or were observed by health worker to ensure correct technique

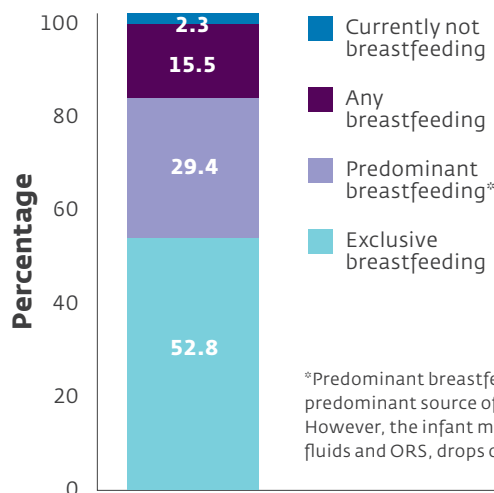
### AT SICK CHILD VISIT IN PREVIOUS 2 WEEKS FOR BREASTFED CHILD 0-23 MONTHS

- 66% of women were counseled about continued breastfeeding during illness

## Breastfeeding Practice (0-23 months old)

NNS 2016 found, that 47% of babies initiated breastfeeding within one hour of birth. 55% of 0-5 month olds were exclusively breastfed.

|   | PMA2017                   |
|---|---------------------------|
| Early initiation of Breastfeeding (within 1 hour) (%) | 59.1                      |
| Given pre-lacteal within 3 days of birth (%)          | 14.8<br>(0-11 months old) |
| Continued breastfeeding at 24 months (%)              | 70.9                      |
| Received infant formula in last 24 hours (%)          | 7.0                       |



73% of 0-1 month olds, 53% of 2-3 month olds, and 25% of 4-5 month olds were exclusively breastfed.

## Complementary Feeding: Appropriately Timed and Targeted Counseling

### FOR 0-5 MONTH OLDS

- 19% of mothers received advice on complementary feeding

### FOR 6-11 MONTH OLDS

- 26% of mothers received advice on complementary feeding in the last 30 days

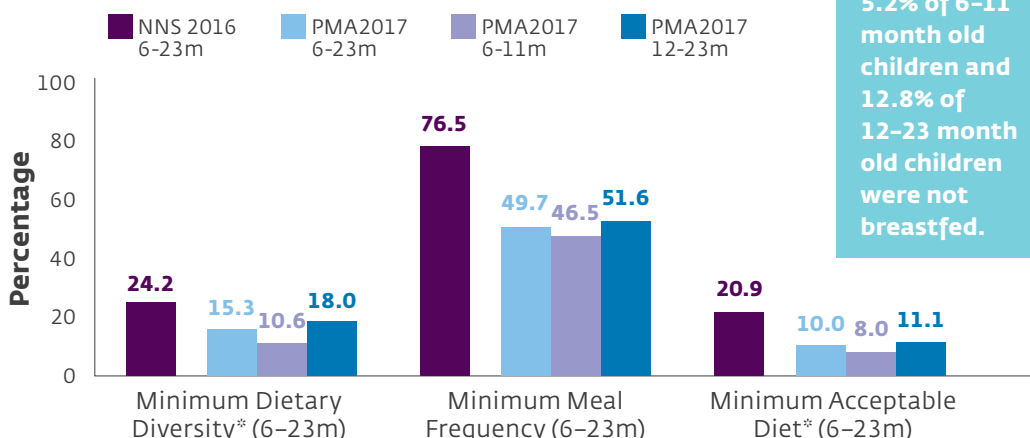
### FOR 12-23 MONTH OLDS

- 28% of mothers received advice on complementary feeding in the last 3 months

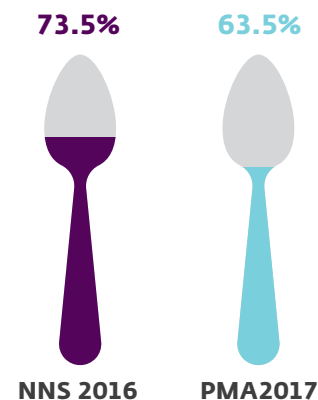
### FOR CHILDREN 6-23 MONTHS WITH SICK CHILD VISIT IN PREVIOUS 2 WEEKS

- 33% of mothers received advice on continued feeding during illness

## Complementary Feeding Practice



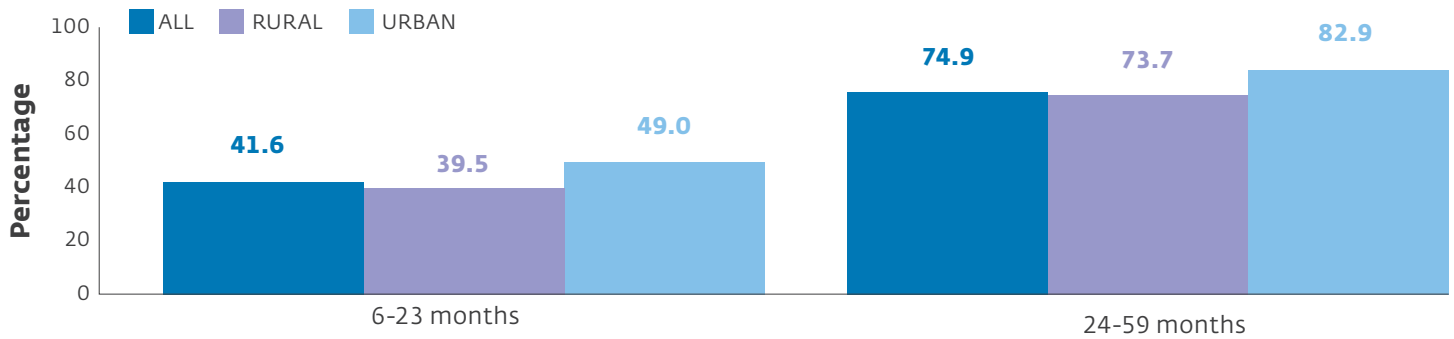
## INTRODUCTION OF SOFT, SEMI SOLID OR SOLID FOODS BETWEEN (6-8M)



\*Minimum Diet Diversity and Minimum Acceptable Diet estimates include breast-fed and non-breastfed children. NNS uses WHO 2006 Infant and Young Child Feeding definitions. PMA2020 reflects recent proposed changes to definitions and corrects for bias against breastfed children by including breast milk as a food category and uses a cut off of >5 food groups for all children.

## CHILD CONSUMPTION OF UNHEALTHY FOODS

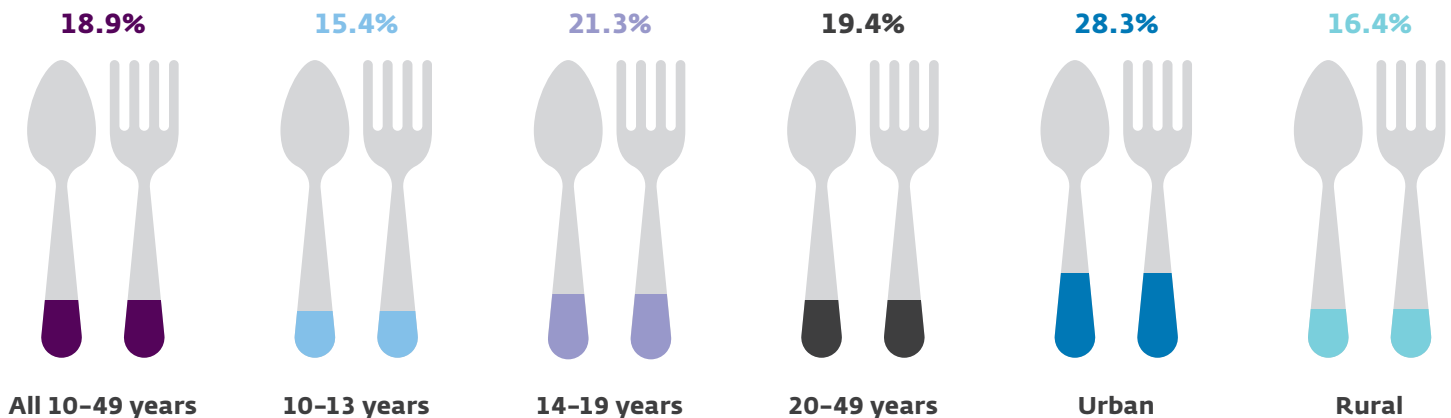
### Children 6–59 Months Who Consumed Processed Snack Food\* or Sugar-Sweetened Beverages Yesterday\*\*



\*Processed snack food includes sugary foods or savory snacks.

## DIETARY INTAKE: WOMEN & ADOLESCENT GIRLS\*\*

### Women and Adolescent Girls (10–49 y) Who Consumed From at Least 5 of 10 Food Groups Yesterday



### Women and Adolescent Girls (10–49 y) Who Consumed Fried or Sugary Foods or Sugar-Sweetened Beverages Yesterday



5.4%  
Fried



5.9%  
Sugary



35.9%  
Sugar-Sweetened  
Beverage



39.8%  
One or  
more  
unhealthy  
foods

\*\*Respondents were able to select more than one answer

## SURVEY DESIGN

PMA2017/Burkina Faso Nutrition Round 1 used a two-stage cluster design with urban-rural strata. The sample of 83 enumeration areas (EAs) was drawn from the l'Institut National de la Statistique et de la Démographie (INSD) master sampling frame. In each EA, 89 households, up to three private service delivery points (SDPs), and up to three public SDPs serving that EA were selected. Households were randomly selected using the "Random Number Generator" application. Occupants in selected households were enumerated and the nutrition questionnaire was administered in eligible households, defined as a household with both a child under two and a woman age 10–49. In eligible households, all women age 10–49 were contacted and consented for interview. Data collection was conducted between June 2017 and September 2017. The final sample included a total of 7,146 households (98.2% response rate), 2,311 eligible households (32.4% eligible rate), 4,438 females (98.1% response rate) and 150 SDPs (97.4% response rate). This sample included: 2,384 recently pregnant women; 830 females 10–14 years old; 713 females 15–19 years old; 2,895 females 20–49 years old; 672 children 0–5 months old; 634 children 6–11 months old; 1,098 children 12–23 months old; and 1,372 children 24–59 months old. Note: data presented as 24–59m age group in this brief is not representative and therefore we do not calculate a combined 6–59m estimate.