

# Psychosocial Stimulation in Nutrition (STIMNUT)

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#### **BACKGROUND AND AIMS**

In Mali in 2021 - prevalence of severe acute malnutrition (SAM) in 6-59 months children: 1,8% (INSTAT, 2021). In Koutiala in 2016 - prevalence of SAM : 3.3% (*MSF, 2016*).

Children who survive SAM are at higher risk of impaired cognitive and emotional development.

Psychosocial stimulation of children - stimulation through sensory input (e.g., visual, auditory, tactile), as well as emotional stimulation provided through an affectionate caregiver-child bond, can have both short and long-term beneficial effects on cognitive and social development of children with SAM.

In 2014, Action contre la Faim (ACF) developed the FUSAM ("Follow-up of SAM children") protocol, a brief psychosocial intervention combined with nutritional treatment.

To reduce infant morbidity and mortality, Médecins Sans Frontières (MSF) has been working in Koutiala since 2009, with the Malian Ministry of Health (MOH) to strengthen preventive and curative care throughout the district.

Study objective: To assess the feasibility and acceptability of integrating an adapted version of the psychosocial stimulation intervention (FUSAM) into the Koutiala Therapeutic Feeding Programme (TFP) for children aged 6-23 months with SAM.

#### PRELIMINARY RESULTS

The term **childcare** was spontaneously associated by the participants with "feeding", "hygiene" and "breastfeeding". Other practices like "playing", "seeking medical care" and "sleeping" were less frequently mentioned by key informants, parents of SAM and non-SAM children (Fig. 1).

In addition, the main barriers perceived by the key informants and the parents of non-SAM children which would prevent parents from childcare were the overload of work for the mothers, the strong dependence of the mothers on the household chiefs in case of child illness, the large number of children per families, and the lack of financial means and knowledge.

### **METHOD Study design:** mixed methods study in 3 parts



Part 1. Initial assessment

Jul - Aug 2022

Why? To explore and identify key factors, perceptions, norms, and practices influencing children's malnutrition and developmental process.

How? Data collection through semistructured interviews ("int." in Fig. 1) with parents/caregivers of SAM children, in depth interviews ("i-d int." in Fig. 1) with key informants, and focus group ("FG" in Fig. 1) discussions with parents/caregivers of non-SAM children.

When it comes to the care of a sick child, the results showed that the care depends on the knowledges conveyed in the sociocultural sphere and on the organization of the family unit (Fig. 2).

With regard to the socio-cultural sphere, two types of speeches have been identified: the care linked to biomedical **norms** (feeding the child well, washing hands, etc.), and the care linked to traditional norms (use of decoctions, the prohibition of certain foods for children, etc.).



Part 2. Contextual adaptation of FUSAM

Oct - Nov 2022 (ongoing)

Why? To adapt the FUSAM protocol to the context and enhance its ownership and uptake by the community.

**How?** A participative action research (PAR) approach with key stakeholders, including health care workers, programme managers, parents, caregivers, traditional healers, etc.

With regard to the **family sphere**,

a consensus was observed in all

the interviews on the gender

of

child's mother is the one taking

care of the childcare. In addition,

the father, as head of the

concession, is associated in all

interviews with the person

responsible in the event of illness

and household expenses.

care.

agreed that the

distribution

participants



Part 3. Implementation and evaluation of the adapted version of FUSAM

Dec 2022 - Feb 2023

Why? To **implement** the adapted version of the FUSAM manual and assess its feasibility and acceptability.

How? Two study teams composed of 2 psychosocial workers (or equivalent) working in pairs, will be trained to deliver the psychosocial intervention.

## **Population**

Children 6-23 months, with their parents/caregivers, followed up at the Outpatient Therapeutic Programme (OTP) at MSF supported MOH health structures in Koutiala and at the MSF hospital.

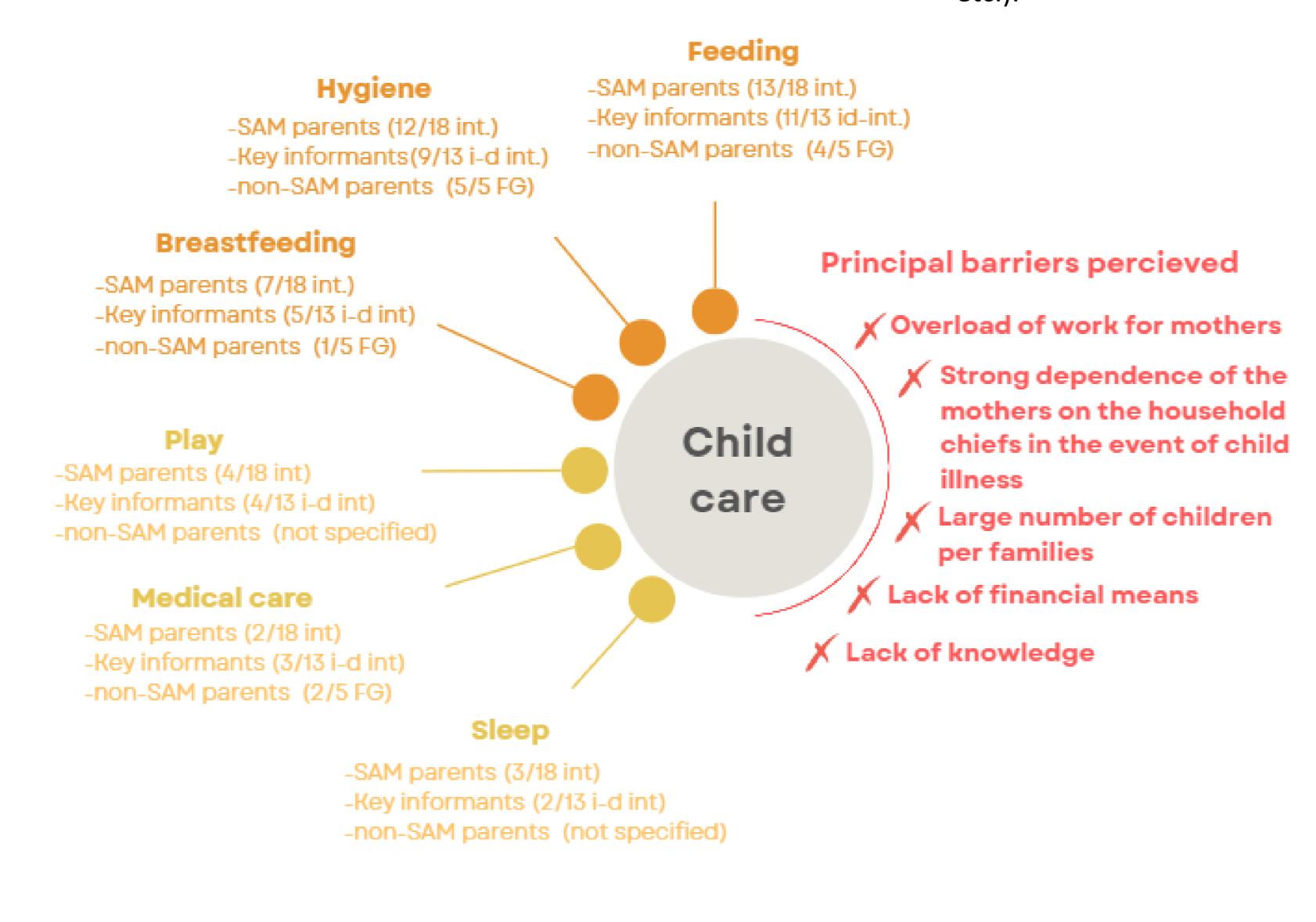


Figure 1. Main topics related to children's care and principal barriers to their care, as perceived by parents of SAM and non-SAM children and key informants.

### **ACKNOWLEDGMENT**

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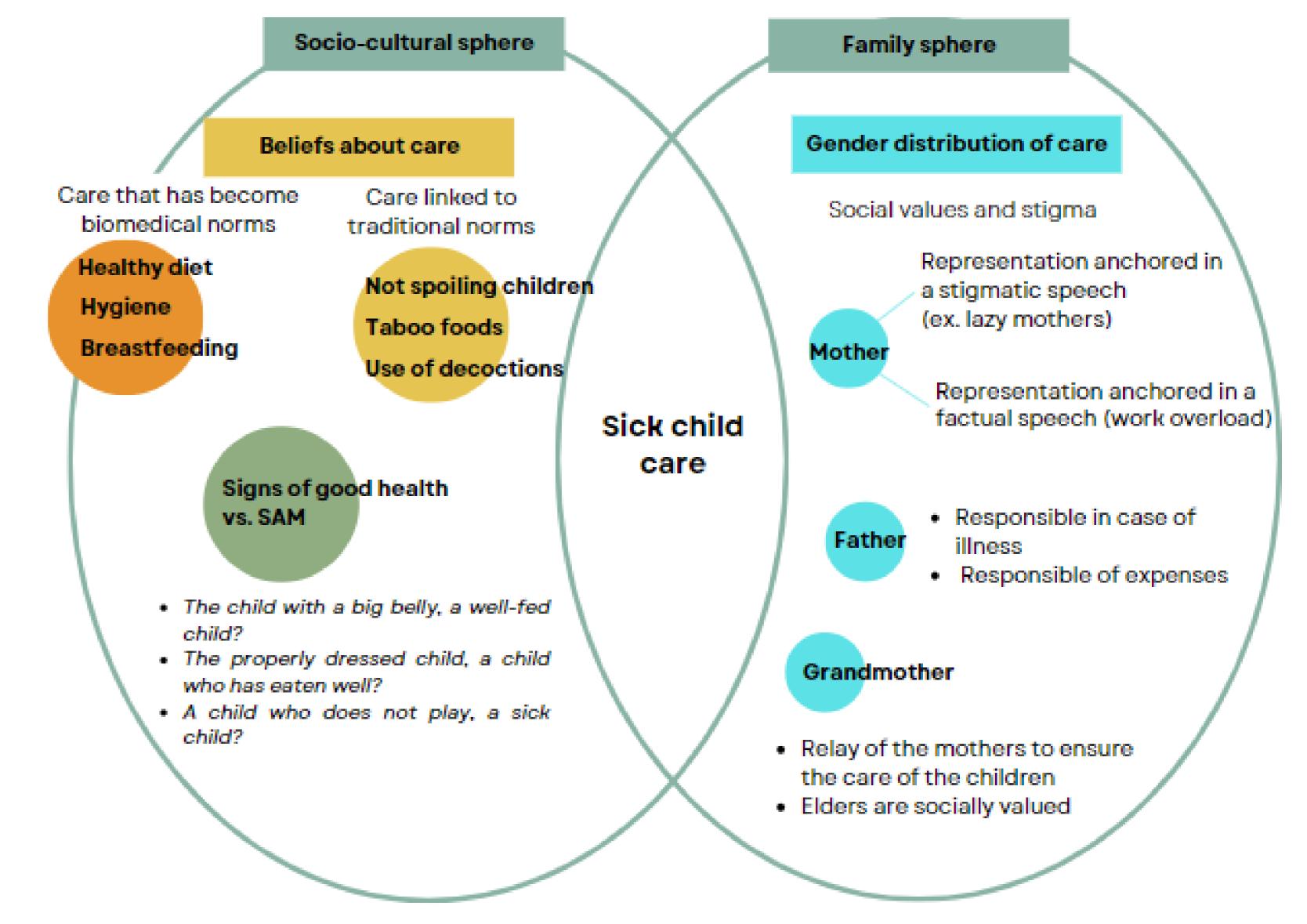


Figure 2. Elements of the socio-cultural and family spheres related with sick-child care.

The expected impact of the study is the development of a framework that may enable the psychosocial stimulation intervention to be adapted to and reproduced in other contexts.











**CONCLUSION**