

# 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.

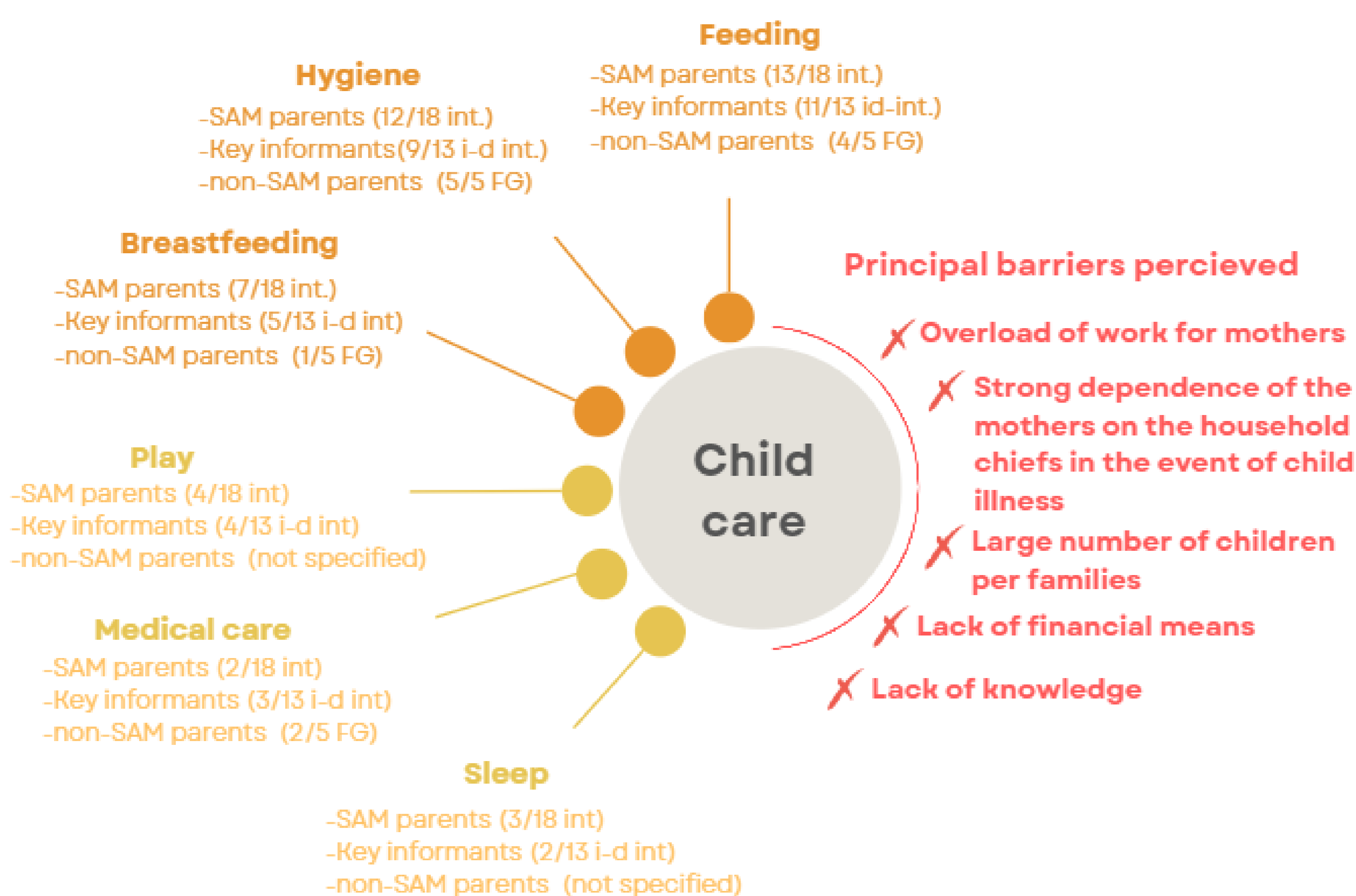


Figure 1. Main topics related to children's care and principal barriers to their care, as perceived by parents of SAM and non-SAM children and key informants.

## ACKNOWLEDGMENT

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## METHOD

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



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

## CONCLUSION

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.



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