



NORTH DAYI DISTRICT HEALTH DIRECTORATE

LIST OF NUTRITION-ORIENTED INTERVENTIONS AND PROGRESS

PERIOD: 1Q, 2026

NAME OF OFFICER: JEREMIAH OFORI TIBU

**DESIGNATION/SIGNATURE: PUBLIC HEALTH OFFICER (NUTRITION)/
DISTRICT NUTRITION OFFICER**

Introduction

The Nutrition/Diet-therapy unit organizes community and client-centered interventions on weekly, monthly and quarterly basis in order to ensure the improvement in nutritional well-being of the population. This document highlights key nutrition interventions available in the year and how the district performed for the first quarter, 2026. Some of the activities include:

1. Routine Growth Monitoring and Promotion for Children under 5 years

During the period under review, routine growth monitoring and promotion was championed throughout all health facilities, with various strategies adopted to improve on outcomes. This service is rendered across 66 outreach points and 17 static points in the district. During the period, the unit placed more emphasis on improving the CWC registration rates among children 0-11 months especially, culminating in the results seen. In all, 358 children were registered during the period while an average of 2400 children attended CWC sessions monthly. The unit, through the health facilities, increased the number of home visits and this resulted in an improvement in the registration rates observed.

2. Non-Communicable Diseases Control

This program offers a platform for the population with issues of Diabetes, Hypertension, Cancer, Stroke and other Cardio-vascular diseases to receive nutrition help. These clinics are held periodically at various health centres in the district during the period.

During the period under review, 12 new hypertensive cases were seen at the unit and at various health facilities compared to 4 during the same period last year. Also, 3 Diabetes cases were



also managed during the period under review compared to 2 during the same period last year. These clients are usually referred from the health facilities to the unit for dietary management. Improvements have been recorded in most of the cases though lifestyle issues mostly take a long time to resolve. Follow ups have also been made on the cases.

3. Micro nutrient Deficiency Control

- A. Vitamin A Supplementation: Vitamin A supplements are given to children 6 to 59 months to boost their immune system and also improve their eye sight. Two different sets of capsules are given: a 100,000IU for children 6 to 11 months and a 200,000IU dose for children 12 to 59 months. These are recorded in the Maternal and Child Health Record Booklet and the Child Welfare Clinic Register. During the period under review, 2883 children 6 to 59 months were given vitamin A; a marked improvement over the previous quarter.
- B. Iodine Deficiency Control: Salt samples used by various households in the district are tested on quarterly basis by health workers to ensure all salts have the minimum legally acceptable level of iodine (more than 15ppm). In all, salts from 290 households were tested and about 48.4% passed; a marked improvement over the previous quarter. Surveillance on goiter is also done on quarterly basis to ensure cases are detected as early as possible. Health education on iodized salt is also carried out at homes and at Community Information Centers. An estimated number of 290 households were reached during the period.
- C. Girls Iron-Folate Tablet Supplementation Program: Another program that leads to Micronutrient Deficiency Control is the Girls Iron-Folate Tablet Supplementation Program. In order to reduce the incidence of anaemia among adolescent girls, the Ghana Health Service with support from partners introduced this program in Ghana for both girls in and out of school who are between 10 to 19 years. Despite the challenges, the district continues to push for better outcomes. The program offers a weekly dose of IFA to adolescent girls in schools while a monthly allocation of IFA is given to adolescent girls out of school. A total of 1824 adolescent girls in school received at least one IFA during the period while a total of 187 adolescent girls out of school take the IFA tablets on monthly basis. The unit recorded a drop in the number of adolescent girls receiving



the supplement in the quarter under review compared to the previous quarter as a result of stock-out of IFA tablets in the Volta Region.

4. Community Management of Acute Malnutrition

This program offers the population, a platform to handle malnourished children in the district. Some are treated as Inpatient while the rest are treated as outpatient. Outpatient cases are treated using plumpy nuts while the inpatient ones are admitted at the hospitals and management is done using specially prepared formula. The unit continued to manage malnutrition cases despite not been officially trained in this regard. The unit is managing 5 new cases with one being a major SAM case currently receiving inpatient care at Anfoega Catholic Hospital with the support of Hon, Member of Parliament for the North Dayi constituency.

Improvement has been seen in the other cases hoping to achieve positive result that would enable their discharged soon.

4. Nutrition Education/Counselling clinic

During the period under review, nutrition talks focusing on the following were held at various community gatherings, schools and CWC sessions. This was done in collaboration with the Health Promotion unit of the Health Directorate. With most communities in the district now organising durbars, most of these messages are channeled through such media and the use of CICs. Talks on the following was mostly highlighted during the period under review.

- Exclusive breastfeeding (10 sessions with about 109 audience)
- Appropriate and timely complementary feeding (6 sessions with about 46 audience)
- Diabetes and its implications (4 sessions with about 61 audience)
- Hypertension and its implications (8 sessions with about 73 audience)

Again, ward rounds are done every Thursday in the wards of the Anfoega catholic hospital.

5. Nutrition-Friendly Schools Initiative

The aim of this program is to basically promote the uptake and sustenance of good nutrition services at various schools in the district. So far, 34 out of 73 schools in the district have been oriented.



The program expects school authorities to develop and implement policies aimed at improving the nutritional well-being of learners.

During the period under review, 8 out of the 34 schools pass the school assessment and appraisal exercise and were declared nutrition friendly school with three schools having 5 stars, four schools with 4 stars and one school with 2 stars respectively. It is worth noting that all schools that were selected are really doing well and all have submitted their activity reports.

7. School Feeding Activities

School feeding activities continued in all eligible schools during the period. Pursuant to the protocols of the school feeding program, the nutrition unit visited some selected schools in the district to ascertain the conditions and the foods served. It also offered the nutrition unit, the chance to interact with the learners, school heads and SMC executives. Problems ranging from compromised quality of foods, lack of food varieties, food portion sizes and non-compliance to menu tables were observed in the schools. The period under review also saw the Unit, in collaboration with the School-feeding Desk at the assembly carry out re-orientation activity for the school feeding caterers. In all, 10 schools were reached in this regard. It is expected that, the main caterers that came for the re-orientation would also go back and orient their cooks. Main issues discussed were the challenges observed, hygiene protocols and minimizing nutrient loss in foods.

Conclusion

The comprehensive efforts of the Nutrition/Diet-therapy unit of North Dayi District Health Directorate in the first quarter of 2026 have yielded significant improvements in addressing nutritional challenges within the communities, through targeted interventions spanning micronutrient deficiency control, management of acute malnutrition, non-communicable diseases control, nutrition education, school initiatives, growth monitoring, and school feeding activities, the unit has significantly contributed to enhancing the overall health and well-being of the population. Continued collaboration and innovation will be key to sustaining and furthering these positive outcomes in the future.