

DIRECT DISTRIBUTION OF SOYFOODS AS A PART OF THE TOTAL CONTROL OF THE EPIDEMIC (TCE) PROGRAM IN THE SOFALA PROVINCE OF MOZAMBIQUE HAS RESULTED IN IMPROVEMENTS IN BOTH OBJECTIVE AND SUBJECTIVE MARKERS OF HEALTH AND WELL-BEING. SOYFOODS WERE WELL ACCEPTED AND PROVIDED SUPPORT FOR THE GAP IN PROTEIN SOURCES IN THE DIET OF THE BENEFICIARIES.

BECAUSE THIS PROGRAM SHOWED AN IMPORTANT IMPACT IN RECIPIENTS OF SOY PRODUCT RATIONS, FURTHER EXPLORATION TO DESCRIBE THE BENEFITS OF FORTIFYING DIETS WITH HIGH-QUALITY SOY PROTEIN IS WARRANTED.



SOYFOODS DIRECT FEEDING PROGRAM IN THE SOFALA PROVINCE OF MOZAMBIQUE

FOOD FOR PROGRESS PILOT EVALUATION

EXECUTIVE SUMMARY

THIS BROCHURE IS THE SUMMARY OF A PILOT PROJECT FOR EVALUATING THE HEALTH IMPACT OF A SOYFOOD DISTRIBUTION UNDER THE FOOD FOR PROGRESS PROGRAM THROUGH THE UNITED STATES DEPARTMENT OF AGRICULTURE IN COLLABORATION WITH PLANET AID AND THE WORLD INITIATIVE FOR SOY IN HUMAN HEALTH.

Mozambique is located in the southeastern region of the African continent along the shoreline of the Indian Ocean. Around 70% of the 19 million people living there live below the poverty line. The average HIV prevalence rate is estimated at over 12%, with highest rates in the Sofala Province.

The Humana People to People program initiated both a direct distribution and microenterprise program to assist orphans and people living with HIV/AIDS (PLHA) that included textured soy protein (TSP) and defatted soy flour (DSF) in collaboration with the World Initiative for Soy in Human Health (WISHH).

Baseline background and health information was gathered on a subgroup of 387 persons prior to the start of food distribution. The follow-up information was gathered on 138 of the beneficiaries.

Malnutrition was common in both adults and children at baseline. Of the 303 children measured, 98% were moderately to severely malnourished and 61% exhibited multiple nutritional failures with a higher risk for illness and death. Nearly 81%

reported that they routinely did not have enough food to eat and 55.1% reported problems that prevented them from eating adequately, including diarrhea, vomiting, stomach pain, taste changes, and general illness. Nearly 15% reported getting sick from an unclean water supply.

Access to high quality protein sources was rare, with between 0.5-4.4%

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having routine access to animal products. Interestingly, soybean

products were the most common high-quality protein consumed by 4.4% of survey participants.

The follow-up evaluation was performed after six months of intervention. Results showed that 67% of adults improved body mass index (weight for height). Both children and adults improved nutritional status indicators. 81% improved muscle function, 92% improved body cell mass (an estimate of muscle and organ tissue volume), and 94% maintained or improved body fat. Between 68% to 76% of children improved their height and weight scores. In addition, fewer children showed multiple nutritional failures at follow-up.

The program was well-understood by nearly 60% of families with a mean of six people per family consuming the soyfood products. Between 93-96% of beneficiaries noted that they “extremely liked” various aspects of the soyfoods, including taste, look, and mouthfeel. A preference for the TSP was noted by 68% of those surveyed.

While there were no significant differences seen for diarrhea and other illness reported for this short pilot, 95% suggested that they felt soyfoods had made a positive difference in their health.

This pilot evaluation program showed an important nutritional impact in the recipients of soyfood rations. Continued monitoring is planned to determine longer-term impacts in health indicators.

**CHILDREN SHOWED THE MOST
IMPROVEMENT IN NUTRITIONAL AND
HEALTH RISK INDICATORS.**

- 68% IMPROVED HEIGHT FOR AGE
- 69% IMPROVED HEIGHT FOR WEIGHT
- 76% IMPROVED WEIGHT FOR AGE