

THE NETWORK: TOWARDS UNITY  
FOR HEALTH & FACULTAD DE MEDICINA,  
UNAM, PRESENT



THE NETWORK  
TOWARDS UNITY FOR HEALTH



Facultad de Medicina



# TUFH2020 MEXICO

VIRTUAL CONFERENCE

"PRIMARY HEALTH CARE: A PATH  
TOWARDS SOCIAL JUSTICE"

SYSTEMS AND COMMUNITY BASED  
RESPONSES TO COVID-19

SEPTEMBER 23-25, 2020

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## TUFH 2020 Abstracts

<b>Title</b>	<b>The inverse equity hypothesis: ethno-geographic and socioeconomic inequities suggest policy changes to a cash-transfer program to improve nutritional-status in post-Conflict-Myanmar</b>
<b>Type</b>	Oral Presentation <i>Working with Underserved Populations towards Community Empowerment</i>
<b>Presenting Author</b>	Sabai Tun
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<b>Country</b>	Myanmar
<b>Abstract N°</b>	TUFH106

### Content

Addressing maternal and child malnutrition remains a priority issue in Myanmar. In October 2018, the Department of Social Welfare initiated a Maternal and Child Cash Transfer (MCCT) program to improve nutritional outcomes for mothers and children in Kayah, which is home to many underserved ethnic groups. A multistage cluster sample survey was conducted in 2019 in all 7 Kayah townships, stratified by ethnogeographic area: urban, rural and hard to reach areas under ethnic armed group control. Malnutrition was assessed by anthropometry and households' wealth quintile was classified by Poverty Probability Index. Among 1303 households with children < 5 years, the prevalence was 34%, 19%, and 5% for stunting, underweight, and wasting, respectively. The prevalence of childhood stunting was 2to3 times higher in rural and hard to reach respectively, compared to urban areas (17%). The percentage of children < 2 years who achieved the minimum dietary diversity was lowest in hard to reach (14%) and in households in the poorest wealth quintile (5.9%), compared to urban (54%) and rural (43.2%) areas and wealthiest households (50%). MCCT coverage was twice as high in urban and rural areas than in hardto reach areas, and for wealthiest households than for the poorest. To the extent that the MCCT program improves nutritional status, as currently implemented the MCCT program appears to exacerbate ethnogeographic and socioeconomic inequities in undernutrition. Additional effort is required to accelerate MCCT coverage in hard-to-reach areas, and to narrow the wealth coverage gap within all areas of Kayah State.



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