Evaluation of the C-IYCF Counseling Package in Nigeria: Exploring the Enabling Environment

SPRING-UNICEF Webinar:

Lessons Learned from Implementing UNICEF's Community Infant and Young

Child Feeding (C-IYCF)
Counseling Package
9 June 2016

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Nigeria C-IYCF Evaluation Objectives

Components To Be Assessed: Nigeria C-IYCF Counseling Package



Contextual and environmental factors that enable or hamper success



Program processes, implementation achievements and cost



Skills and knowledge of IYCF among community volunteers



Caregivers knowledge, attitude, beliefs and practice related to IYCF

Evaluation Design

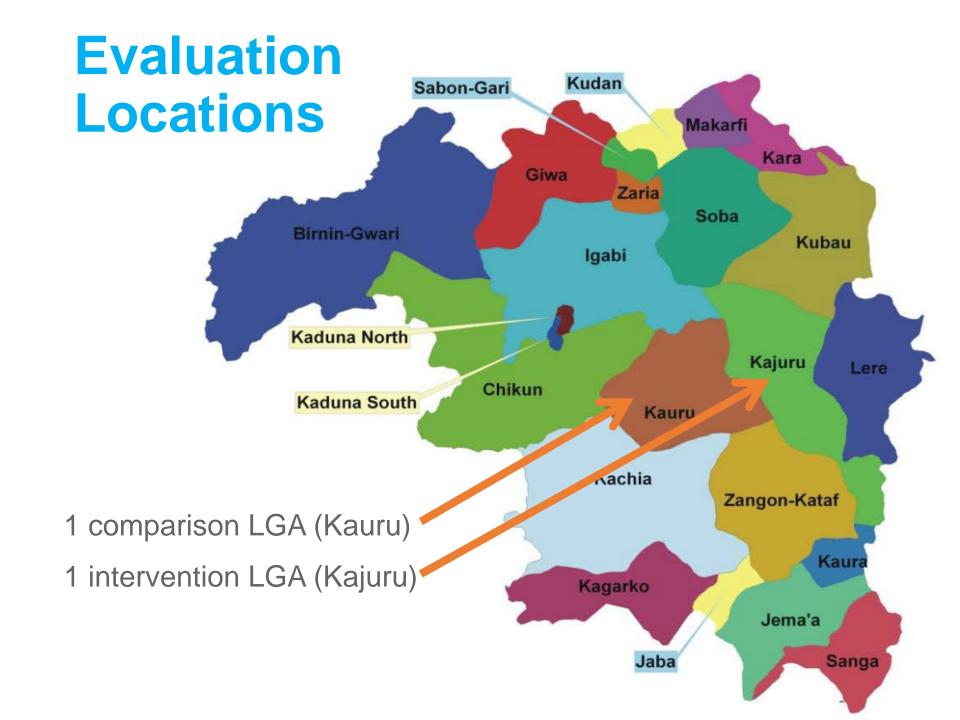












Nigeria C-IYCF Evaluation

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Caregivers knowledge, attitude, beliefs and practice related to IYCF

Enabling Environment:Policies

LIMITED

- Availability of nutrition-related policies, reports, and tools, particularly at lower levels
- Access to data related to maternal and child nutrition

HIGH

 Engagement by federal offices with federal-level policies and programs and overseeing the work of state-level offices









Enabling Environment: Governance

LIMITED

- Evidence of inter-ministerial coordination for decisions about administration and implementation of nutrition programs
- Engagement of the State at the community level
- Knowledge and attitudes of maternal and child nutrition among Community Volunteers

HIGH

- Level of support from various national ministries
- Engagement of state offices with budgeting and oversight of policies and programs









Enabling Environment: Resources

LIMITED

- Severe understaffing at health facilities
- Difficulties conducting regular supervision or mentoring visits of health care workers and Community Volunteers because of severely limited resources









Enabling Environment: Social Support

LIMITED

- Knowledge among Ward Development Committee members and community leaders
- Regard for Community Volunteers to provide services
- Status of women to make decisions and participate in support groups

HIGH

- Knowledge of maternal and child nutrition at the national, state,
 LGA, and facility levels, but with room for improvement
- Recognition by all levels of the need for nutrition programming
- Expressed willingness to support the C-IYCF program actively

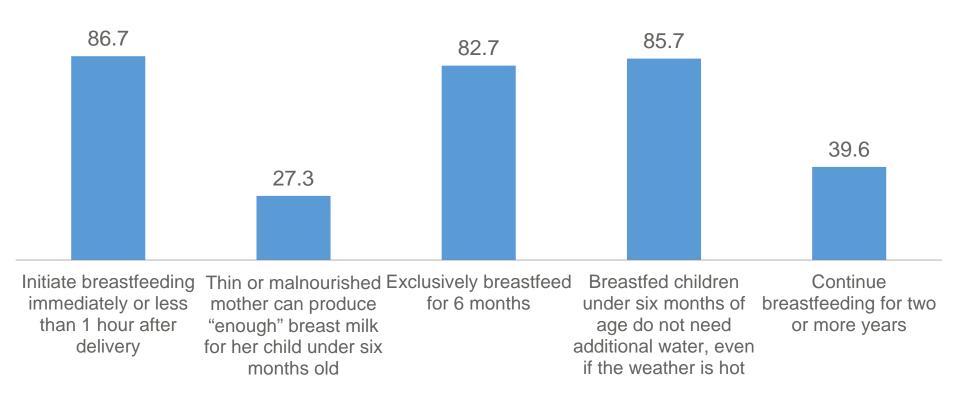








Knowledge among health workers high but had room for improvement.



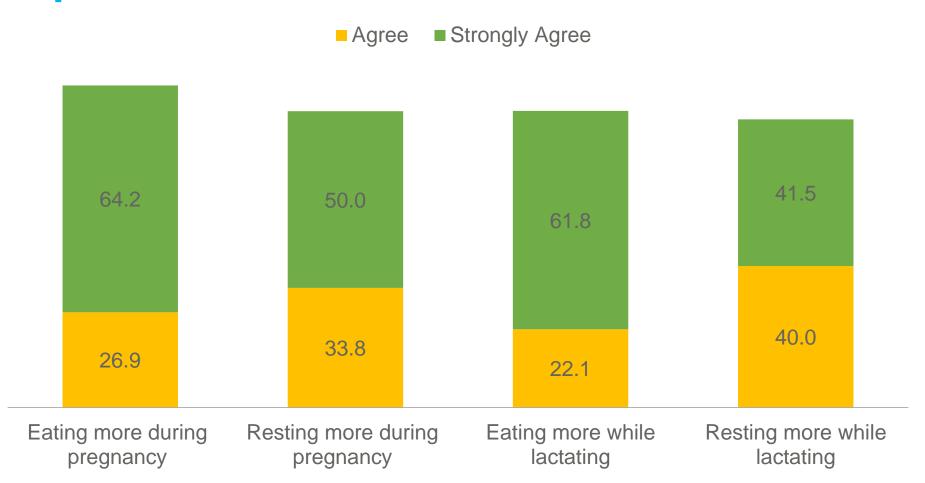








Percent of health workers who strongly agreed with priority maternal nutrition practices was low.



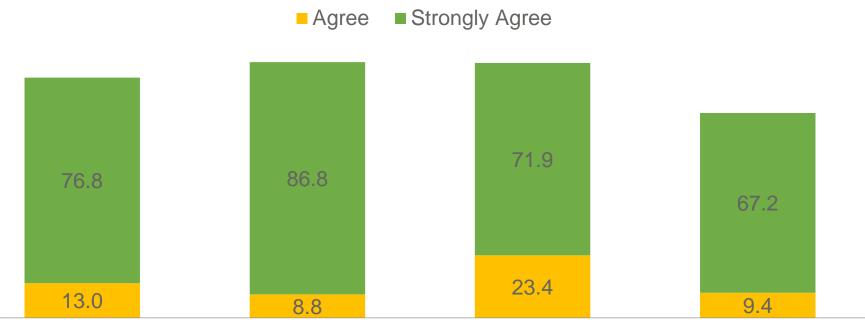








Percent of health workers who strongly agreed with the importance of priority breastfeeding practices had room for improvement.



Starting breastfeeding immediately after birth

Breastfeeding exclusively for six months

Breastfeeding children for at least two years

Breastfeeding children under six 6 months of age on demand

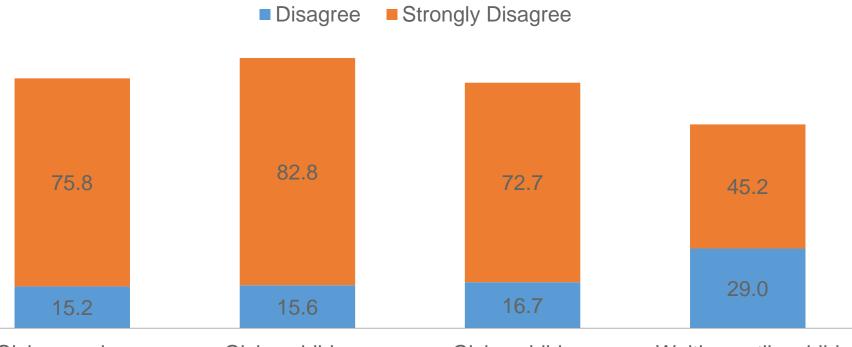








Percent of health workers who strongly disagreed with the IYCF misconceptions okay, but needs improvement.



Giving newborn children glucose or sugar water at birth

Giving children under 6 months old additional water if the weather is very hot

Giving children under 6 months old thin or watery pap

Waiting until a child is 1 year old to feed animal-source foods

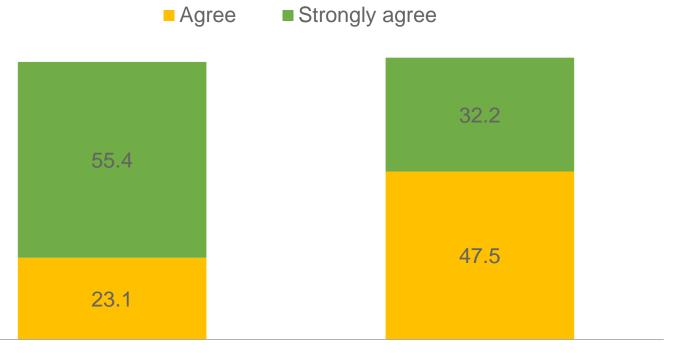








Percent of health workers who strongly agreed with the importance of complementary feeding practices was in need of improvement.



Introducing soft, semi-solid foods to children at 6 months of age

Feeding children over 6 months old a diverse diet





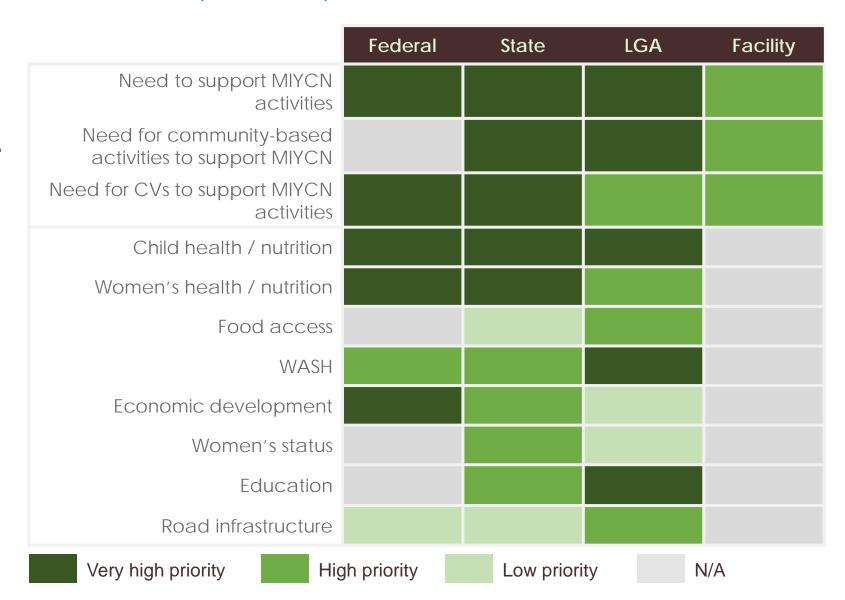




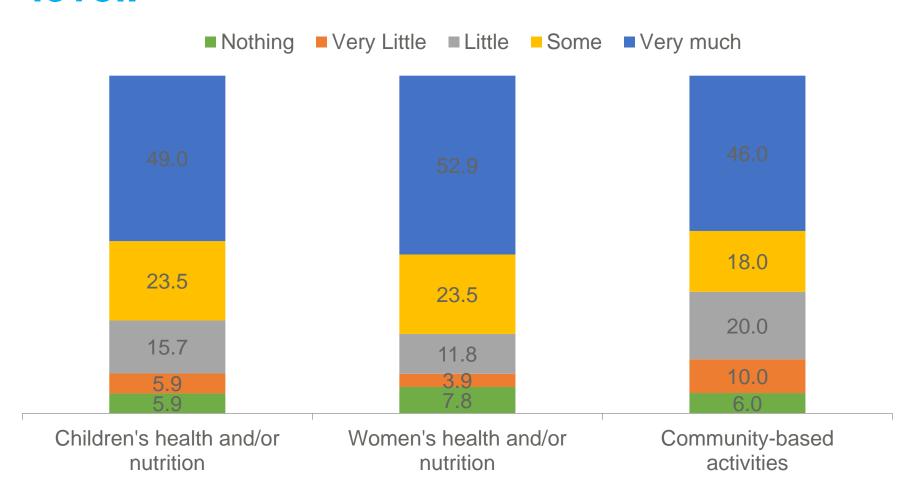
MIYCN is of high or very high priority at the federal, state, and LGA levels.

Perceptions

Priorities



Health facilities are not doing much related to MIYCN or at the community level.



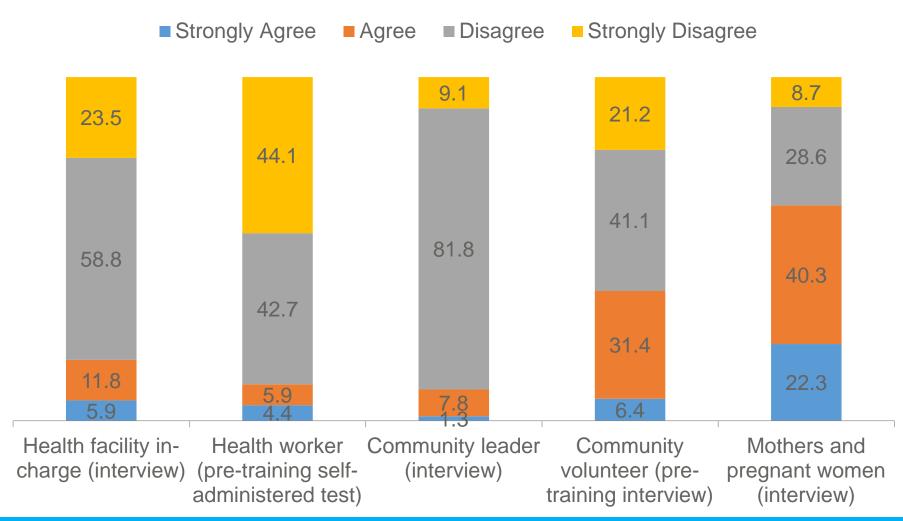








Only the men should make the important decisions in the family.



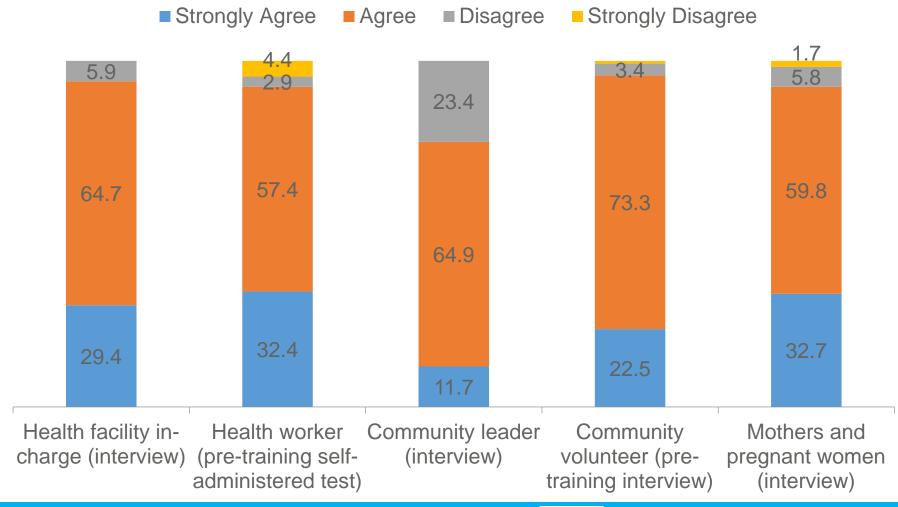








A mother should be able to express her opinion regarding child feeding.



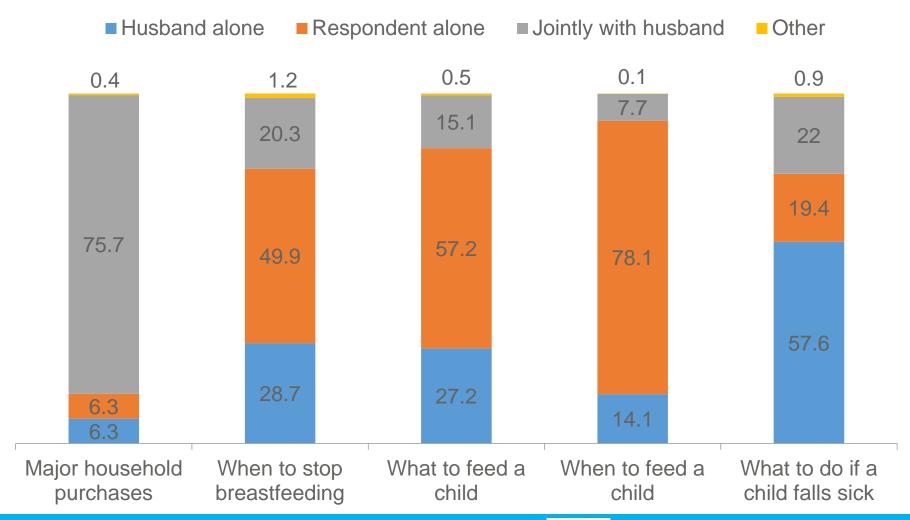








Decision-making power among women is limited.











Recommendations

- ✓ Ensure don't assume that key actors are familiar with and have essential policies, protocols, and job aids, etc.
- ✓ Organize routine coordination meetings at the national and district levels to strengthen coordination and ownership
- ✓ Engage district and sub-district leaders in planning, implementing, and monitoring, including supporting and incentivizing community volunteers
- ✓ Don't forget to build nutrition knowledge and attitudes at all levels
- ✓ Proactively address women's status decision-making power, control of resources, and mobility
- ✓ Actively support community volunteers in their service delivery role











Special acknowledgment and thanks to the Federal Ministry of Health, the Kaduna State Ministry of Health, the National Bureau of Statistics, the Kajuru LGA, Peggy Koniz-Booher (SPRING), France Begin (UNICEF), Stanley Chitekwe (UNICEF), Davis Omotola (UNICEF), Babajide Adebisi (SPRING), and Chris Isokpunwu (FMOH), as well as Susan Adeyemi (SPRING Study Coordinator), Arjan De Wagt (UNICEF), Christine Kaligirwa (UNICEF), and Dr. Florence Oni (UNICEF).