

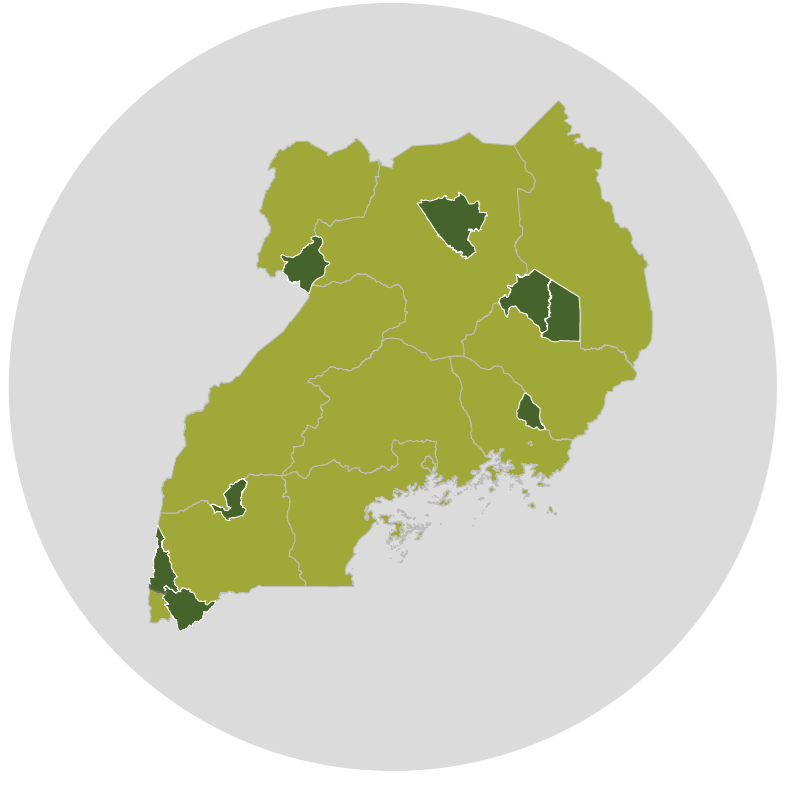


Sarah Ngalombi

USING SBCC TO LOWER BARRIERS TO APPROPRIATE USE OF MICRONUTRIENT POWDERS IN UGANDA

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BACKGROUND



In Uganda, the MOH is piloting a program to promote MNP fortification of complementary foods for infants and children 6-23 months, with an eye toward national expansion. The MOH and partners are positioning MNP as part of an overall strategy to improve the complementary feeding aspect of IYCF messaging and counseling, as well as WASH practices. Social and behavior change communication (SBCC) is a central focus of the pilot and will be used to improve knowledge of child nutrition, build skills in child feeding, and increase demand and motivation for improved complementary feeding practices, including MNP use.

With researchers from the University of British Columbia, the Micronutrient Technical Working Group (MN-TWG) conducted formative research to assess the acceptability of MNP in Uganda and to inform the design of MNP packaging. SPRING conducted formative research to identify key messages for MNP decision makers, including mothers, fathers, and grandmothers. Based on these studies, the MN-TWG developed a national SBCC strategy for MNP in partnership with SPRING, UNICEF, and WFP. These partners are implementing MNP research in the eight highlighted districts.

MICRONUTRIENT POWDERS (MNP) are single-dose sachets containing a powdered mixture of vitamins and minerals that is stirred into a child's portion of food immediately before consumption. The WHO recommends MNP for children 6-23 months in settings where the prevalence of anemia is >20% since they have been shown to reduce anemia and iron deficiency. The MNP formulation Uganda used for its pilot contains daily recommended nutrient levels of 15 vitamins and minerals. Caregivers were directed to give their child three to four MNP sachets per week.

RESULTS

DEVELOPING AN SBCC STRATEGY

Because MNP was a new product in Uganda, there was a need to mobilize and sensitize stakeholders at all levels of the community and health systems. Using findings from the formative research, the MN-TWG developed a community mobilization and communication strategy for MNP Social and behavior change communication (SBCC) the national SBCC for nutrition strategy launched in November 2015. All national-level tools and materials are tailored for local settings. For example, tools are translated into local dialects or targeted to specific opinion leaders.

OBJECTIVES OF THE COMMUNICATIONS STRATEGY

- ✓ Create an enabling environment for MNP use by promoting MNP as an effective nutrition and health intervention and dispelling misconceptions and misinformation.
- 👤 Ensure reliable and user-friendly delivery of information about MNP for caretakers, including proper instructions with confident responses to caregivers' questions and concerns.
- 📊 Create informed demand among caretakers and other family members.
- 🍲 Ensure proper and safe use of the product at home, without displacing recommended IYCF and WASH practices.

The methods for implementing the strategy include community mobilization and sensitization meetings, communications and messaging materials, MNP counseling, and mass media outlets.

TARGET AUDIENCES

Primary:

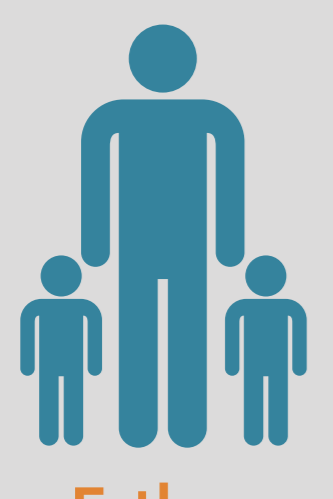


Caregivers (usually mothers)



Health facility workers and community health workers

Secondary:



Fathers



Opinion leaders

COMMUNICATIONS MATERIALS

PRINT MATERIALS

- **Enrollment cards:** Refilled at each distribution with the refill date. SPRING's midline assessment found that caregivers relied on the card for planning refills.
- **Stickers:** Remind caregivers of regular and proper use of MNP, and are a sign to others that the household uses MNP. SPRING's midline assessment found that caregivers easily understood the sticker, usually posting it at home to remind them of MNP practices.
- **Adherence calendars:** Help caregivers adhere to 3-4 MNP doses per week. SPRING's midline assessment found that some caregivers have trouble understanding the calendar, especially

illiterate caregivers. Initial feedback suggests coloring the calendar every other day does not support the flexible dosing regime, which recommends delivering 3-4 times a week. Future versions should allow mothers to mark any days to keep track of the total weekly doses.



Photo credit: SPRING/Uganda

MNP PACKAGING

- MNP are packaged in single-serving sachets. Caregivers receive 30 sachets in boxes (from UNICEF and WFP) or pouches (from SPRING). Caregivers keep empty sachets in the box or pouch for monitoring by health workers.
- The pilot showed that caregivers and local officials prefer boxes because they are easier to close and are biodegradable.

- Based on feedback from local advocacy groups, the MN-TWG will update packaging to remove the mother and show the child alone, and will clarify that the child is older than six months.



RADIO, THEATRE, AND VIDEO

SPRING's midline assessment found that nearly all respondents reported hearing about MNP on the radio:

- The MNP jingle and top-of-the-hour DJ mentions are quick reminders to caregivers to get and use MNP.
- SPRING staff, MNP users, and district or national officials participate in call-in radio talk shows to create awareness about MNP and address challenges and concerns related to MNP usage.
- 20 or 30-second advertisements for MNP promote the idea that "great mothers" give MNP to their children and "model fathers" support MNP use in the home.

Drama troupe performances: Drama groups perform scripts similar to the radio plays on market days and in busy trading centers, using the skits to start conversations with the crowd. SPRING is testing these performances in Namutumba District.

Video: Drama troupe performances are videotaped to be shown in cinemas in Namutumba District during football matches to target men.



Photo credit: SPRING/Uganda

Videos and drama troupe performances explore issues related to MNP use in Namutumba district.



Photo credit: SPRING/Uganda

SPRING MNP Officer Diane Achanda participates in a radio talk show on Capital FM.

"I heard them on NBS radio...they were announcing that the MNP are good, and... when you give them to the child he looks good, doesn't fall sick..."
—Community user, five children with one child 6 to 23 months of age

NEXT STEPS

Endline survey work in pilot districts includes modules on the SBCC materials. Based on research findings and information gathered through routine monitoring activities, members of the MN-TWG will design final versions of all communications tools for the planned national program. The MOH will continue to develop SBCC material with stakeholders from the Uganda International Baby Food Action Network and the MOH communications team.

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