PROGRAMMATIC EXPERIENCES AND PLATFORMS FOR PROMOTING KEY DIET AND EATING PRACTICES

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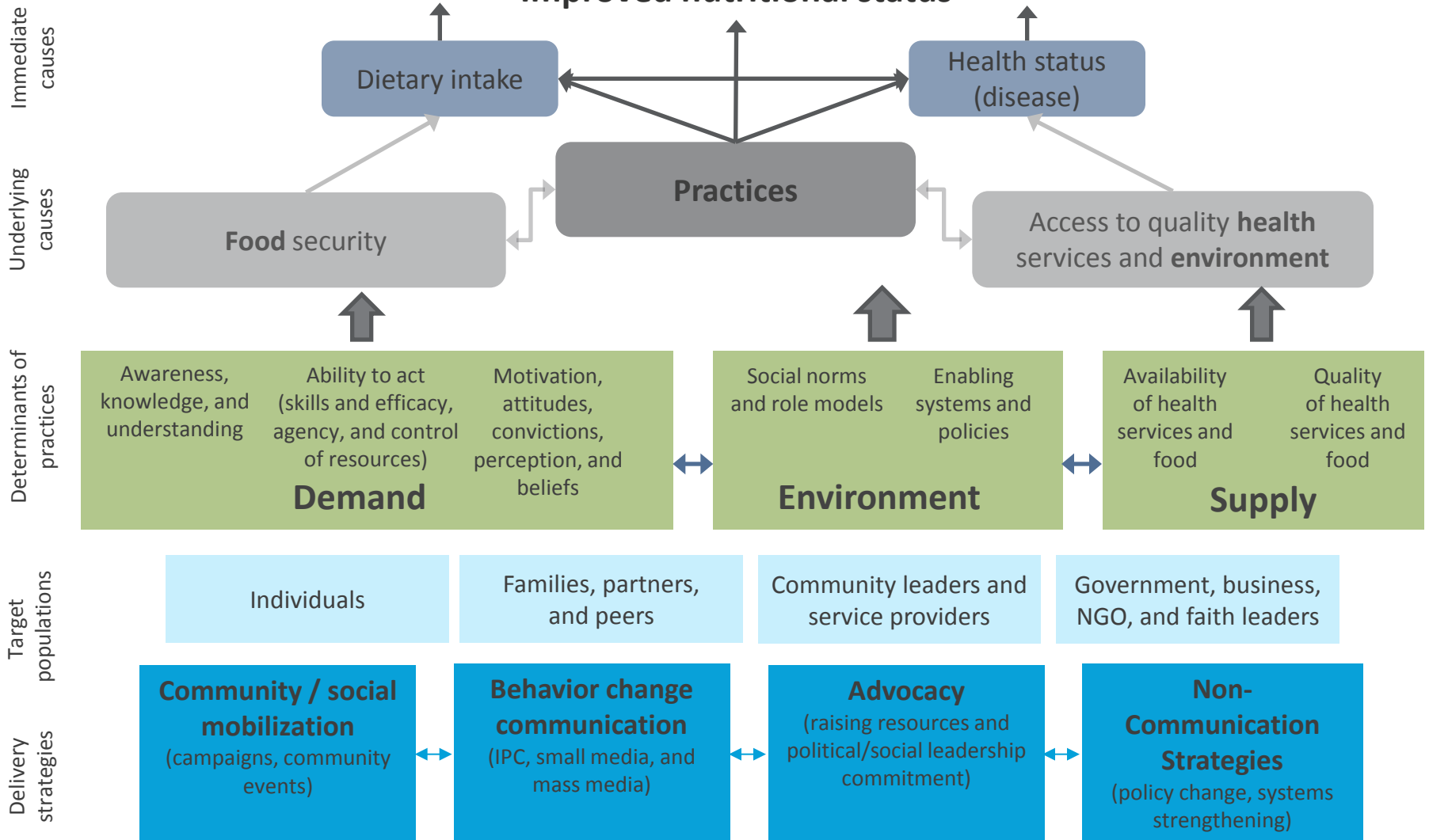SPRING

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Premise

- Identifying efficacious practices to address current nutrition problems among adolescent girls and WRA is an essential first step; however, those practices will not be adopted or sustained…
    - if they are not feasible for the populations most at risk and
    - if they are not promoted effectively, with the right delivery strategy, targeting the right audience(s), and addressing the applicable determinants of change.

Improved nutritional status

	Dietary intake		Health status (disease)

Immediate causes

Underlying causes

Food security	**Practices**	Access to quality **health** services and **environment**

Determinants of practices

Awareness, knowledge, and understanding	Ability to act (skills and efficacy, agency, and control of resources)	Motivation, attitudes, convictions, perception, and beliefs	Social norms and role models	Enabling systems and policies	Availability of health services and food	Quality of health services and food
Demand			**Environment**		**Supply**	

Target populations

Individuals	Families, partners, and peers	Community leaders and service providers	Government, business, NGO, and faith leaders

Delivery strategies

Community / social mobilization (campaigns, community events)	**Behavior change communication** (IPC, small media, and mass media)	**Advocacy** (raising resources and political/social leadership commitment)	**Non-Communication Strategies** (policy change, systems strengthening)

Review of the Literature

- In response, SPRING conducted a rapid review of the literature and programmatic documentation to…

  – provide information on global programmatic experiences to improve the nutrition of adolescent girls and WRA and

  – summarize inputs, outcomes, and lessons learned from implementers who have or are currently carrying out nutrition programs for adolescent girls and WRA.

Methods

- Searched Pubmed, Google, Google Scholar, USAID's Development Experience Clearinghouse, the World Bank Project Database, and the websites of major organizations, implementing agencies, and USAID-funded programs.

- Limited search to LMIC and publications and/or projects implemented between 2004 – 2014.

- Conducted an online survey, reaching out to program managers through the literature and internet search as well as others known by the authors.

Search Terms

1. Adolescent girls and/or pregnant and/or lactating women and/or women of reproductive age and nutrition program
2. Adolescent girls and/or pregnant and/or lactating women and/or women of reproductive age and micronutrient and/or supplementation
3. Women and cash transfer and nutrition
4. Women and behavior change communication and nutrition

Findings

- Out of 47 persons/institutions contacted, there were a total of 15 survey responses providing detailed programmatic information on 8 projects.

- 54 programs were identified that sought to improve nutrition (practices or status) of adolescent girls and/or WRA in LMIC between 2004 and 2014.

- Donors:
  - USAID (26)
  - The World Bank (8)
  - Bill and Melinda Gates Foundation (5)
  - GAIN (1)
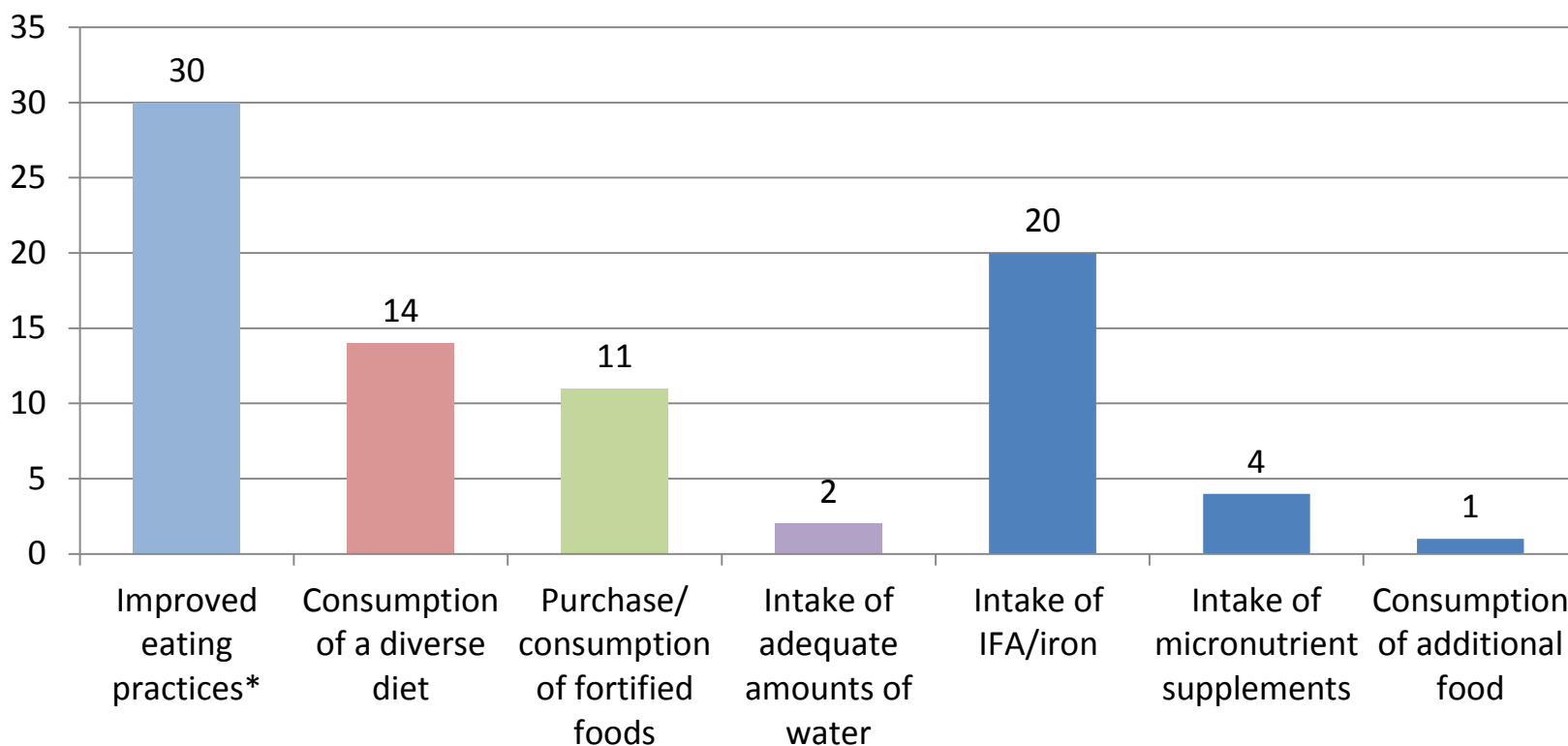 - DFID (1)
  - UNICEF (1)
  - Other (11)

Target Population

- Adolescent girls*: 9 programs

- Women of reproductive age: 46 programs

* The term "adolescent girl" was not always defined or was defined differently in the literature. The authors recognize overlap between these categories.

Practices Promoted

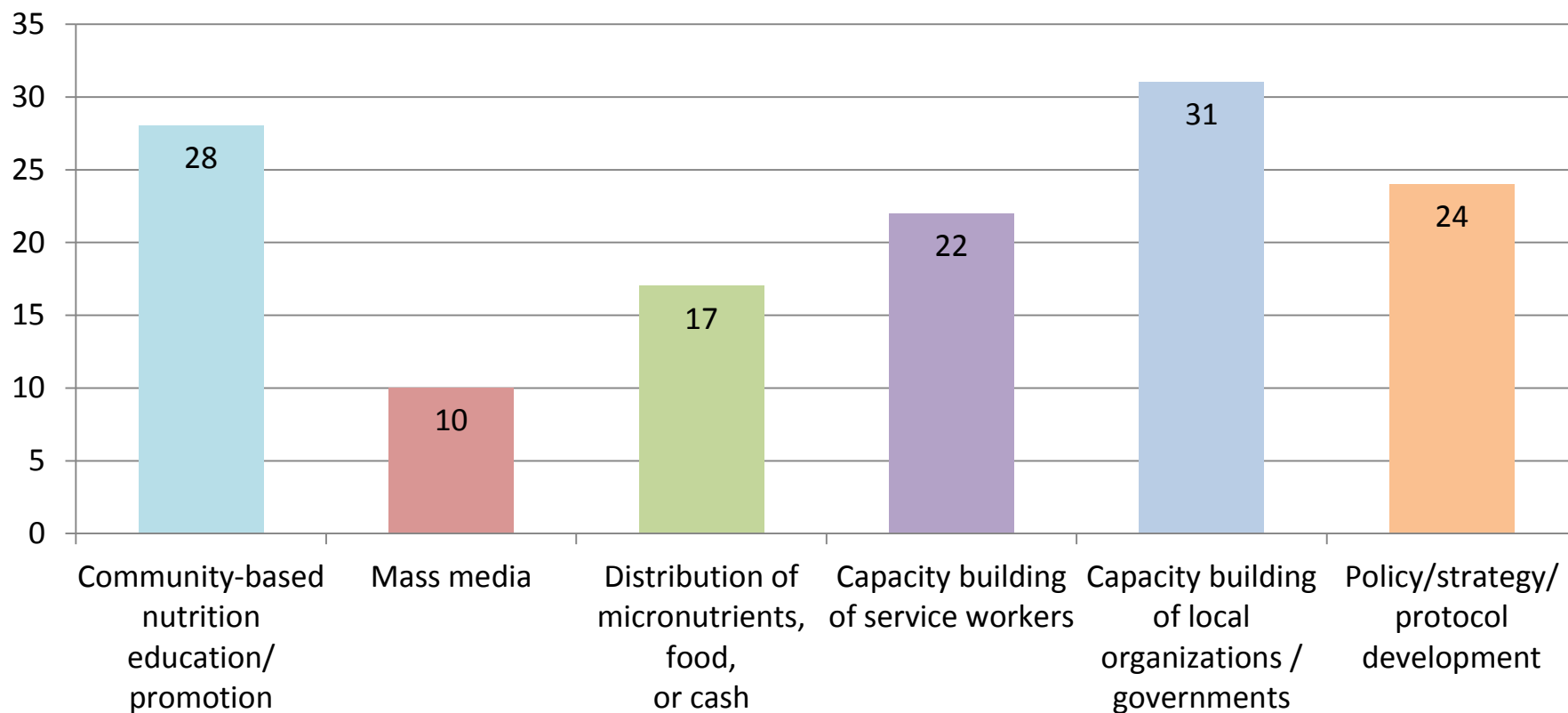Number of programs promoting each practice

*The category 'Improved eating practices' was used when programs reported promoting 'dietary practices', 'eating practices', or 'food intake.'

Effectiveness

- Of the 44 long-term or completed programs, 15 provided data on the effectiveness of the approach in changing priority nutrition practices

Initial Recommendations: Policies and Systems

1. Address nutrition of adolescent girls and WRA in policies, systems and guidelines.

2. Define adolescence and bring attention to the specific nutritional needs of adolescent girls.

3. Disaggregate data by age and gender at the national level.

4. Integrate nutrition into existing guidelines for services that reach adolescent girls and/or WRA.

5. Streamline and collaborate at all levels.

Initial Recommendations: Policies and Systems

1. Expand upon lessons learned from IFA programs.

2. Consider interventions to prevent and address risk factors for N-RNCDs.

3. Identify platforms to address the nutritional needs of women outside of pregnancy and lactation periods.

4. Involve women and communities in nutritional program planning.

5. Identify opportunities for multisectoral collaborations and/or program integration.

6. Address gender norms.

Thank you