Systems Thinking in Action: The Kyrgyz Republic

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The Kyrgyz Republic

- Former Soviet republic
- Majority-Muslim
- Middle-income country with **high rates of literacy and health facility utilization**

Persistent **stunting** among children under five (18 percent) (DHS 2012)

High rates of **anemia** among children under five (43 percent) and women of reproductive age (35 percent) (DHS 2012)
SPRING / Kyrgyz Republic

• Began in 2014, when USAID Kyrgyz Republic mission invited SPRING to...
  • improve the nutritional status of women and children
  • use a multi-sectoral approach, working in partnership with the Feed the Future value chain project, Agro Horizon

• Conducted a situation analysis, stakeholder consultation, baseline survey, and formative research
Based on findings of a lack of awareness around nutrition and limited health worker capacity

Designed an approach that...

- worked closely with government and civil society counterparts

- focused on increasing the uptake of 11 evidence-based practices

- through policy change, health capacity strengthening, and social behavior change communication
Mapping of the Systems Framework for Nutrition

- SPRING’s Systems Framework was not available at initiation
- This mapping exercise was an opportunity to:
  1. strengthen the framework and guide development of practical tools
  2. reassess SPRING’s approach in the Kyrgyz Republic to potentially identify gaps for future investment.
- Mapping involved interviewing project staff and stakeholders at various levels
- Development of tools, identification of key informants, and reporting of findings followed an inclusive process
Findings from a Systems Mapping Exercise
Policies and Governance

• Developed National Technical **Guidelines** on Anemia Prevention & Treatment and deworming and helminth infection **protocol**
• Facilitated issuance of government **decrees** for:
  - anemia and deworming policies and protocols
  - the infant and young child feeding (IYCF) training and counselling as a health worker responsibility
  - integration of nutrition content in the pre-service educational curricula for doctors and nurses
  - Baby Friendly Hospital Initiative (BFHI) certifications
• Actively **participated** in SUN CSO network
• Conducted **advocacy and education** at the national/ policy level
Little need and not within scope
Less need related to inputs for nutrition and little could be done, given donor priorities, but...

- Conducted **trainings of trainers** on nutrition counselling for master trainers
- Supported **cascade trainings** within health sector
- **Revitalized BFHI trainings and certification process** for health facility staff in program areas
Inputs and Services

- Trained Ministry of Health (MoH) supervisors in IYCF supportive supervision
- Supported the MoH to conduct supportive supervision visits
Strengthening the HMIS for nutrition was **beyond the scope and not feasible** within the initial project duration, but...

- Conducted baseline, annual, and endline surveys focused on **11 priority practices**
- Engaged **MoH staff and community activists** in meetings to **share and discuss** SPRING progress
- Did not **routinely collect** information on **attitudes and knowledge** related to the 11 priority practices
Information and Communication

- Developed a comprehensive **SBCC strategy** that guided SPRING activities
- Supported MoH in **reviewing, revising, and developing SBCC materials** to promote 11 priority practices
- **Built capacity of the MoH to** design, plan, and implement SBCC
- Engaged **MoH staff** in the dissemination of messages
- Trained and continuously supported **local community activists to educate and counsel** communities and households
- Supported development an urban nutrition communication strategy and implementation of SBCC activities **aligned with the national strategy**
Financing

Largely **beyond the scope** of SPRING, but...

- Generated **interest in assessing and advocating** for government and donor funding
Less of a priority for SPRING because...

- Most targeted households had the resources to make recommended changes
- Government cash transfer program already existed to help those in greatest need
- Agro Horizon project focused on income generation through agriculture
Formative research on food consumption, family diet, WASH and care practices conducted and used to design activities and messages.

Sociocultural context was mostly supportive of priority practices, but the low status of newly married women and intra-household food distribution were identified as barriers to adoption of priority practices.

In response, a gender activity was developed but not taken to scale.

Community activists (both men and women) were selected from their communities and a wide range of backgrounds to ensure receptivity of community members.
Interactions and Consequences

- Used the socioecological model to develop different approaches, addressing different factors in the systems framework, reaching a wide range of people through multiple channels and at multiple levels.
- Ensured that messages were consistent at every level and complementary to messages communicated through multiple channels.
- Facilitated the reporting, sharing, and use of information among regional and national stakeholders to encourage positive interactions, create synergies, leverage positive feedback loops, and avoid negative consequences.
Conclusions and Recommendations
Mapping of the Systems Framework for Nutrition

• There were factors that mapped well to project activities and other where more could have been done, had project staff had the framework to inform design.

• There was clearly overlap between principles of good program design, multi-sectoral nutrition programming, and systems thinking.
Recommendations for the Application of Systems Thinking to Nutrition

1. **Use a systems-thinking lens** to assess, design, prioritize, implement, monitor, and evaluate programs.

2. **Ensure longer periods of performance** and a **mandate** to apply systems thinking.

3. **Provide leadership and structure** for the application of systems thinking.

4. **Leverage existing programs** to ensure that programming gaps are filled.

5. **Strengthen coordination and collaboration** across sectors, departments, and organizations.
With the increasing number of countries adopting multi-sectoral nutrition policies, we must ask **how such policies can be most effective and have the greatest impact**. We believe that the application of systems thinking has the potential to strengthen multi-sectoral and multi-stakeholder programming for nutrition.
Thank you!

For more info, please visit:

https://www.spring-nutrition.org/countries/

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