

Micronutrient Powder Interventions in Mozambique and Ethiopia: Use of Implementation Research in Program Delivery



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Outline

1. Describe MNP delivery models tested in Mozambique and Ethiopia
2. Describe design of the formative evaluations
3. Comment on what we learned

Learning Goals

At the end of this presentation, participants will be able to:

1. Describe how implementation research can inform program design decisions for countries aiming to scale-up nutrition interventions
2. Describe how surveys and focused ethnographic interviews complement each other to illuminate the processes that happen between program inputs and outcomes (especially those which were unexpected)

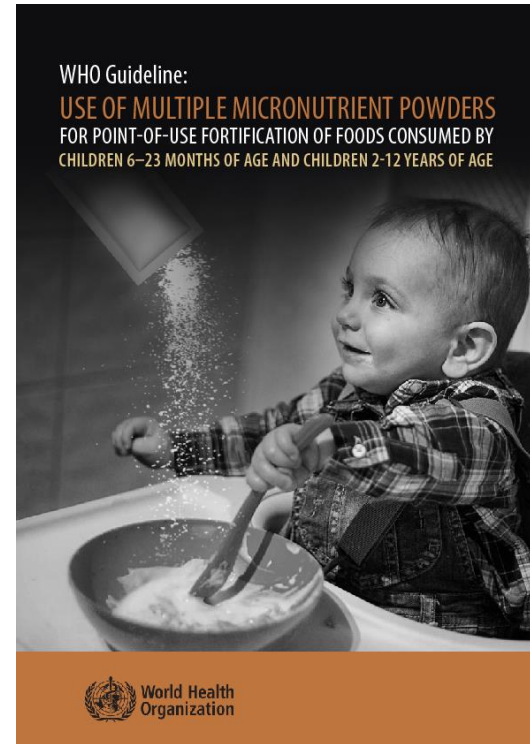
SISN's Classification Scheme of Implementation Research

	Commitment, Support, Financing and Sustainability		
Objects of Implementation	Initiation and Scoping	Planning and Design	Implementation, Iterative Improvement and Scaling Up
Nutrition-specific interventions			X
Nutrition-sensitive actions			
Operationalizing a national multisectoral nutrition agenda			
NGO projects (typically sub-national)			
Implementation Innovations			

A bit of background on MNP

WHO 2016 Micronutrient Powder (MNP) Guideline:

In populations where anemia is a public health problem, point-of-use fortification of foods with iron-containing micronutrient powders in infants and young children aged 6–23 months and children aged 2–12 years is recommended, to improve iron status and reduce anemia



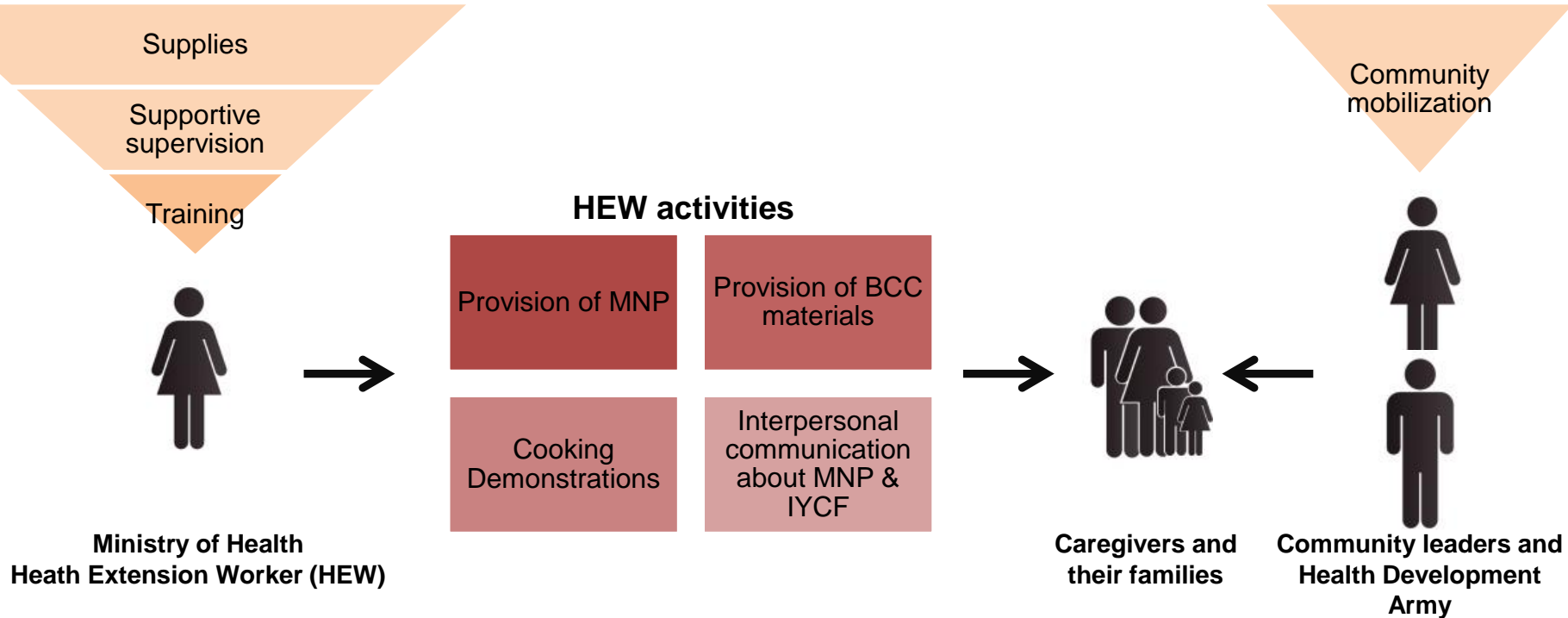
Mozambique

Ministry of Health requested development partners to test diverse delivery platforms across different regions of the country

GAIN developed a design using vouchers aimed at making MNPs more accessible through multiple distribution points located in communities where caregivers live and alleviating the burden on the public health supply system by using a market-based platform



Ethiopia



Goal and Objective

Goal of Mozambique and Ethiopia Ministries of Health:

- Reduce iron deficiency anemia in children 6 to 23 months of age through improved infant and young child feeding (IYCF) practices and use of MNP

GAIN's objective was to support the governments to:

- Test the viability of distribution models to motivate improved IYCF practices and MNP use among children 6 to 23 months of age

Formative Evaluation Design

1. Cross-sectional population-based survey after ~12 months implementation

- Identify bottlenecks in program delivery and adherence to MNP recommendations

Ever heard of MNP

Ever received MNP

Ever used MNP

Continued MNP use

*Biological
impact*

2. Focused ethnographic interviews with caregivers

- Explore caregivers' perspectives on program delivery and feeding MNP to their children

3. Surveys and in-depth interviews with program implementers

- Explore implementers' knowledge and perspectives on program delivery design and processes

Comments on what we learned

- **Mozambique**
 - If the public health system *can* provide a consistent MNP supply, then don't use vouchers
 - If the public health system *cannot* provide a consistent MNP supply, then the system needs to be redesigned and strengthened
- **Ethiopia**
 - Process to obtain new MNP supply needs to be simplified
- **Mozambique and Ethiopia**
 - To ensure sustained use of MNP, caregivers need:
 - Support to follow preparation instructions
 - Strategies to overcome children refusing food
 - Knowledge of side effects and what to do when children are sick

Contribution to IS

- We needed surveys to identify bottlenecks and focused ethnographic interviews to understand why they existed
- Mozambique and Ethiopia examples demonstrate how different data collection methods complement each other and are needed to fully investigate program delivery processes

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(in alphabetical order)

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