

Alive & Thrive Madagascar

PHOTO COURTESY OF THE POWER OF NUTRITION (2020)

Alive & Thrive (A&T) is a global nutrition initiative to save lives, prevent illness, and ensure healthy growth of mothers and children. From 2009–2014, A&T demonstrated that rapid improvements in infant and young child feeding (IYCF) are possible in settings as diverse as Bangladesh, Ethiopia, and Viet Nam.

In 2014, A&T began working in Burkina Faso, India, Nigeria, and throughout the Southeast Asia region, expanding its scope to include maternal and adolescent nutrition, and using agriculture and social protection programs as delivery mechanisms for maternal, infant, and young child nutrition (MIYCN). Now A&T is leveraging its robust network and knowledge base to strengthen systems and build capacity in these and other countries in Africa and Asia.

A&T's work in Madagascar began in 2018 as a partnership with the National Community Nutrition Program Unit (UPNNC) and the Ministry of Public Health (MSANP) in support of the *Projet d'Amélioration des Résultats Nutritionnels* (PARN). As a technical partner for social and behavior change (SBC), A&T conducted situational analyses and formative research that laid the groundwork for an SBC strategy, jointly designed with national stakeholders and PARN partners. Now PARN is scaling up interventions from the SBC strategy in eight regions (see map). This brief provides an overview of A&T's technical assistance for key components of the strategy, and it highlights how A&T will contribute to PARN's impact by transferring critical skills to national stakeholders.

Technical Assistance

Policy and advocacy. In 2019, President Andry Rajoelina was designated a nutrition champion in the African Leaders for Nutrition (ALN) initiative. While his commitment to end stunting has contributed to a growing interest in nutrition across Madagascar's development sectors, preventive nutrition requires more attention and resources. A&T is garnering support for the critical 1,000-day window of MIYCN by developing an advocacy strategy with PARN

Projet d'Amélioration des Résultats Nutritionnels (PARN)

PARN is a ten-year investment that aims to reduce stunting through improved coverage, delivery, and utilization of an evidence-based package of nutrition interventions in the reproductive, maternal, newborn, and child health (RMNCH) platform. This package includes breastfeeding promotion, complementary feeding education, micronutrient supplementation during pregnancy, and other interventions that promote healthy growth in the first 1,000 days.

MULTI-PHASE APPROACH

PARN began implementing in four regions in 2018 and plans to scale up to 15 regions by 2028. The map shows the initial phases of implementation.

- Phase 1: 2018-2020
- Phase 2: 2020-2022
- USAID Implementation



partners. The strategy seeks to engage national and regional decision-makers from all sectors—including health, agriculture, livestock and fisheries, population and social protection, education, and WASH—in order to prioritize resources for MIYCN and strengthen delivery of MIYCN results. The box on the following page highlights A&T's two mandates from the strategy and provides an overview of the advocacy process.

Local capacity will be strengthened by training national stakeholders in the advocacy process, by assisting the National Nutrition Office (ONN) to develop policies that implement the National Nutrition Strategy (PNAN III), and by supporting the ONN to fulfill its role in multisectoral coordination and leadership for nutrition.

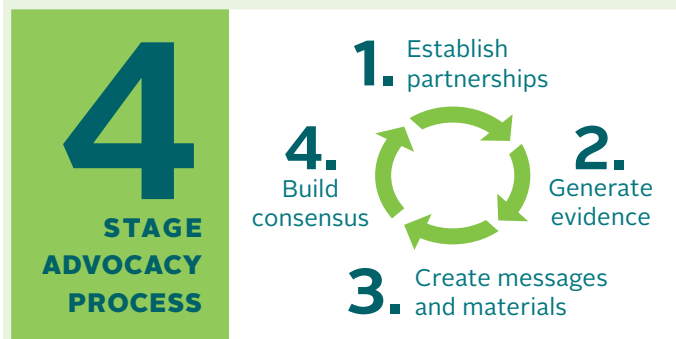
A&T's Advocacy Mandates

MANDATE 1. Prioritize preventive nutrition in health services to protect the first 1,000 days.

- Advocate for MIYCN services to be mainstreamed in existing reproductive, maternal, newborn, and child health (RMNCH) program policies and guidelines.
- Ensure policy and program directives clearly define supervisory functions and accountabilities for MIYCN service delivery.
- Ensure line managers routinely review key MIYCN indicators and take steps to address gaps in quality and coverage of services.

MANDATE 2. Support institutional leadership to make nutrition in the first 1,000 days a top priority in development programs.

- Improve coordination across sectors and among high-level stakeholders, including those with far-reaching platforms such as the Presidency and the National Assembly.
- Strengthen nutrition policies and laws, including the national Breastmilk Substitutes (BMS) Decree, maternity protection laws, and Codex Alimentarius guidelines for infant foods.
- Advocate for adequate funding and budget allocations for MIYCN.



Mass media. A multipronged mass media campaign is scheduled to launch in 2020 with the goal of improving priority MIYCN practices among pregnant women and children under two years of age. The campaign includes radio spots targeting pregnant women, mothers, husbands, and health workers produced in local languages (Malagasy and Betsileo), as well as television spots and other media

targeting decision-makers. The spots will be designed to address key barriers of the behaviors identified in the formative research, which focus on pregnant women's dietary diversity and IFA supplementation, early initiation of breastfeeding, exclusive breastfeeding, and dietary diversity in children 6-23 months.

A&T is working closely with a local creative agency to develop the overall concept, slogan, and branding for the campaign, and throughout the process counterparts from the UPNNC and MSANP will be engaged as a way of building capacity for future mass media endeavors. To ensure the campaign's success, national and regional stakeholders will be supported to regularly monitor data and use it to adjust the broadcasting plan and content.

Interpersonal communication. In Madagascar, *agents de santé* provide maternal and child health care at primary health facilities and *agents communautaire* are volunteers that provide preventive and curative maternal and child health and nutrition services at the community level. A&T is providing technical guidance to PARN partners that are tasked with improving the quality of interpersonal communication (IPC) at all contact points from the facility to the community. This involves supporting UPNNC to develop a pilot approach for integrated coaching and supervision; reviewing provider training curricula and training videos that will be developed to improve counseling skills; and supporting the use of data for decision-making. Based on the learnings from the pilot approach, A&T will help UPNNC take the new approaches to scale across the PARN regions.

Strategic use of data. A&T and partners are working with the Department of Information Systems in the MSANP to prioritize the collection and review of nutrition indicators in routine data processes at the regional and central levels. In addition to increasing accountability for MIYCN results, these data will give supervisors and managers the information they need to address gaps in the quality and coverage of services—including MIYCN IPC in the first 1,000 days and iron-folic acid supplementation during pregnancy. A&T will also conduct field monitoring to support the collection and review of implementation data regularly. This monitoring will measure the coverage of mass media interventions, the coverage of IPC interventions, and trends in MIYCN practices across PARN regions.