

SMALL DOABLE ACTIONS IN ETHIOPIA

This tool provides a list of small doable actions (i.e., priority behaviors or feeding practices) for mothers and concrete actions that other groups (e.g., fathers, grandmothers, health extension workers, religious leaders) can take to support a mother's behaviors. This list was developed for use in Ethiopia in 2015 to guide development of training materials, job aids, and radio materials.

For more program design and implementation tools, please visit the Alive & Thrive tools library:
<http://aliveandthrive.org/resources-main-page/tools-library>

Alive & Thrive is an initiative to save lives, prevent illness, and ensure healthy growth and development through improved breastfeeding and complementary feeding practices. Good nutrition in the first 1,000 days, from conception to two years of age, is critical to enable all children to lead healthier and more productive lives. In its first five years (2009 to 2014), Alive & Thrive demonstrated that innovative approaches to improving feeding practices could be delivered with impact and at scale in three contexts: Bangladesh, Ethiopia, and Viet Nam.

Alive & Thrive is now supporting others to scale up nutrition by applying and adapting tested, proven approaches and tools in contexts such as Burkina Faso, India, and Southeast Asia. With its emphasis on learning and innovation, Alive & Thrive is expanding its focus in Bangladesh to maternal nutrition and taking a more multisectoral approach in Ethiopia.

Background:

The Alive & Thrive program in Ethiopia based its intervention strategy for Infant and Young child Feeding (IYCF) on an analysis of caregiver behaviors according to two basic criteria: "potential impact on child's health and growth" and "feasibility for family to adopt the behavior." The design team first plotted out possible behaviors on a simple graph—where the X axis represented “impact” and the Y axis represented “feasibility.”

The lists below are the resulting “small doable actions” (i.e., priority behaviors or feeding practices) for mothers as well as concrete actions that other groups (e.g., fathers, grandmothers, health extension workers, priests) can do to support the mother's actions.

Small doable actions statement/list:

To achieve the three behavior-based objectives of Alive & Thrive/Ethiopia’s phase 2 program, we will promote specific “small doable actions” that, if carried out by community members in number of different audiences, will result in improved infant and young child feeding practices. The program’s objectives are:

- To sustain exclusive breastfeeding to 6 months of age
- To increase the percentage of children under 2 years who consume foods from 4 or more food groups each day¹
- To increase the percentage of children under 2 years who eat the minimum recommended number of meals each day²

[Call to Action \(small doable actions for each audience\)](#)

As a result of the A&T program activities and materials:

1. Mothers will:
 - a. Give only breastmilk, no water or other liquids or foods, to babies under 6 months
 - b. At 6 months, begin feeding baby enriched porridge that includes grain, legume, milk and egg or meat, and vegetable or fruit every day, even on fasting days
 - i. As baby ages, foods may be prepared or given separately (not in porridge) and should always include animal source food and vegetable or fruit every day
 - c. At 6 months, begin feeding babies solid or semisolid foods 3-4 times a day, every day, even on fasting days

¹ The 7 food groups measured are: 1) grains, roots, tubers; 2) legumes and nuts; 3) dairy products; 4) flesh foods; 5) eggs; 6) vitamin A-rich fruits and vegetables; 7) other fruits and vegetables

² Minimum is defined as 2 times for breastfed infants 6–8 months; 3 times for breastfed children 9–23 months; 4 times for non-breastfed children 6–23 months. “Meals” include both meals and snacks.

- d. State specifically how she will obtain, prepare, and feed her baby animal source foods, especially milk and eggs, every day beginning at 6 months and including on fasting days
2. Fathers will:
- a. Aid their wives with child care and household chores so the baby's mother can take time to breastfeed babies
 - b. Talk with family members, including grandmothers, about committing to breastmilk only for the baby's first 6 months – no water or other liquids or foods
 - c. Talk with family members about the need to feed the baby milk, eggs, and green or orange fruits or vegetables every day
 - d. State specifically how he will obtain milk, eggs, and flesh foods (dried powdered meat, chicken, or fish) for the baby to eat every day, including milk and eggs on fasting days, beginning at 6 months
 - e. Ensure that animal source foods are always available for the baby by keeping for the family milk and eggs that might otherwise be sold or by purchasing milk and eggs as needed, beginning at 6 months (including eggs and milk for fasting days)
 - f. If concerned about use of milk, eggs, and dried powdered meat, (or fish) during fasting, consult with a priest or church leader
 - g. Check in with their wives about how the plan for feeding the baby is going, at least once a week
3. Grandmothers will:
- a. Help with child care and household chores so the baby's mother can take time to breastfeed
 - b. Refrain from giving water or other liquids or foods to babies under 6 months
 - c. Talk with family members, including baby's father, about committing to breastmilk only for the baby's first 6 months – no water or other liquids or foods
 - d. State specifically how she will help the family obtain milk, eggs, and flesh foods (dried powdered meat, chicken, or fish) for the baby to eat every day, including milk and eggs on fasting days, beginning at 6 months
 - e. Check in with the family about how the plan for feeding the baby is going, at least once a week
4. Health Extension Workers (HEWs) will:
- a. Train Health Development Army volunteers (HDATLs) to address IYCF during home visits in the community using timed and targeted counseling
 - b. During all interactions with mothers of children under 2, ask about and support recommended feeding practices
 - c. Take every opportunity to support mothers in feeding their children animal source foods every day beginning at 6 months of age
 - d. Talk with faith leaders about obstacles their parishioners/members face in feeding infants and young children and how the faith leaders can help improve nutrition, especially in relation to feeding animal source foods every day

- e. Celebrate the success of individual families and of communities as they adopt recommended feeding practices
 - f. Conduct food demonstrations (community- or home-based) and ensure that mothers and other family members understand the importance of a thick enriched porridge beginning at 6 months of age
5. HDAs will:
- a. Tailor household visits to the age of the baby
 - b. During household visits, stay focused on messages and actions that will build families' confidence that they can carry out the behaviors, for example:
 - i. State clearly and simply the feeding practice for the child, by age
 - ii. For babies over 6 months (or about to turn 6 months), help mother prepare enriched porridge in the home and/or invite mother to a community food demonstration
 - iii. For babies over 6 months, help mother create a concrete plan for how she will feed her baby animal source foods, especially milk and eggs, every day beginning at 6 months and including on fasting days
 - 1. Identify barriers mother perceives to the feeding practices and help her plan for overcoming these
 - 2. During fasting periods, ask specifically about how she could obtain and prepare eggs and milk every day; connect her with neighbors who could share these products
 - iv. Ask mother to describe what she sees on the CNC (for age of her baby), listen closely, and correct any misunderstanding she may have; use the CNC to describe ideal feeding practices to other family members; on return visits, look for the CNC on the wall and ask the mother how it is helpful
 - c. Work with the mother, father, and grandmothers and encourage them to talk with one another about what the child eats and to make milk and eggs available every day beginning at 6 months
 - d. Remind families to wash their own hands before preparing food or feeding child, and to wash the baby's hands before she eats; demonstrate handwashing while demonstrating food preparation in the home
6. Leaders of the Ethiopian Orthodox Church and community level priests and lay leaders will:
- a. Encourage families to feed their children (6-24 months) milk , eggs, and flesh foods (dried powdered meat, chicken, or fish) every day, including on fasting days
 - b. Explicitly raise the topic of animal source foods, making it clear to families what the Church teaches about how they should feed their young children on fasting days, including how to handle animal source foods without compromising the adults' fasting

- c. At the beginning of long fasting periods, lead the entire congregation/community to develop a plan for ensuring that families with young children have access to eggs and milk throughout the fast (How to lead this process may need to be worked out with the highest leaders of the church)
 - d. Hold a meeting with frontline health workers, HEWs, and HDAs at the start of each long fasting period to reassure them that the Church supports their efforts to help families acquire and feed their children eggs and milk every day, including on fasting days
7. Agricultural extension workers
- a. Deliver three simple messages to every family with a child 6-24 months of age [These messages have not yet been identified, and should reflect program priorities and should fit with themes that agricultural (ag) extension workers address. They should be developed, tested, and revised based on response from ag workers and/or families.]
 - b. In discussing livestock and crops with families, encourage them to use some of their resources to feed their young children (starting at 6 months) milk, eggs, and green and orange vegetables every day, in addition to grains and pulses