



Nutrition Links: Building Capacity for Sustainable Livelihoods and Health

Our Nutrition Links Webinar Speakers



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Affaires mondiales
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McGill



World Vision



HEIFER
INTERNATIONAL



FARM RADIO
INTERNATIONAL



POPULATION
COUNCIL

Ideas. Evidence. Impact.



Project Core Team (over the years)

Senior Staff

McGill University : Grace Marquis (PI), Shelley Clark (CI), Frances Aboud (CI)

University of Ghana: Esi Colecraft (PI), Richmond Aryeetey (CI)

World Vision International: Bridget Aidam (PI)

World Vision Ghana: Raymond Owusu (CI)

Heifer Ghana: Roland Kanlisi

Farm Radio International: Benjamin Fiafor



Key Program Coordinators/Assistants

McGill University: Theresa Thompson-Colon, Myriam Benchiba-Charron, Helga Saundy, Katie Birks, Oduro Oppong-Nkrumah

University of Ghana: Boateng Bannerman, Biyeen Kombian, Flavia Baako, Afua Atuobi-Yeboah, Moses Klevator, Dinah Amoah

World Vision Canada: Curtis Lafleur, Laura Synder, John Guan

World Vision Ghana: Stephen Matey, Joana Baidoo, Mawuena Asem

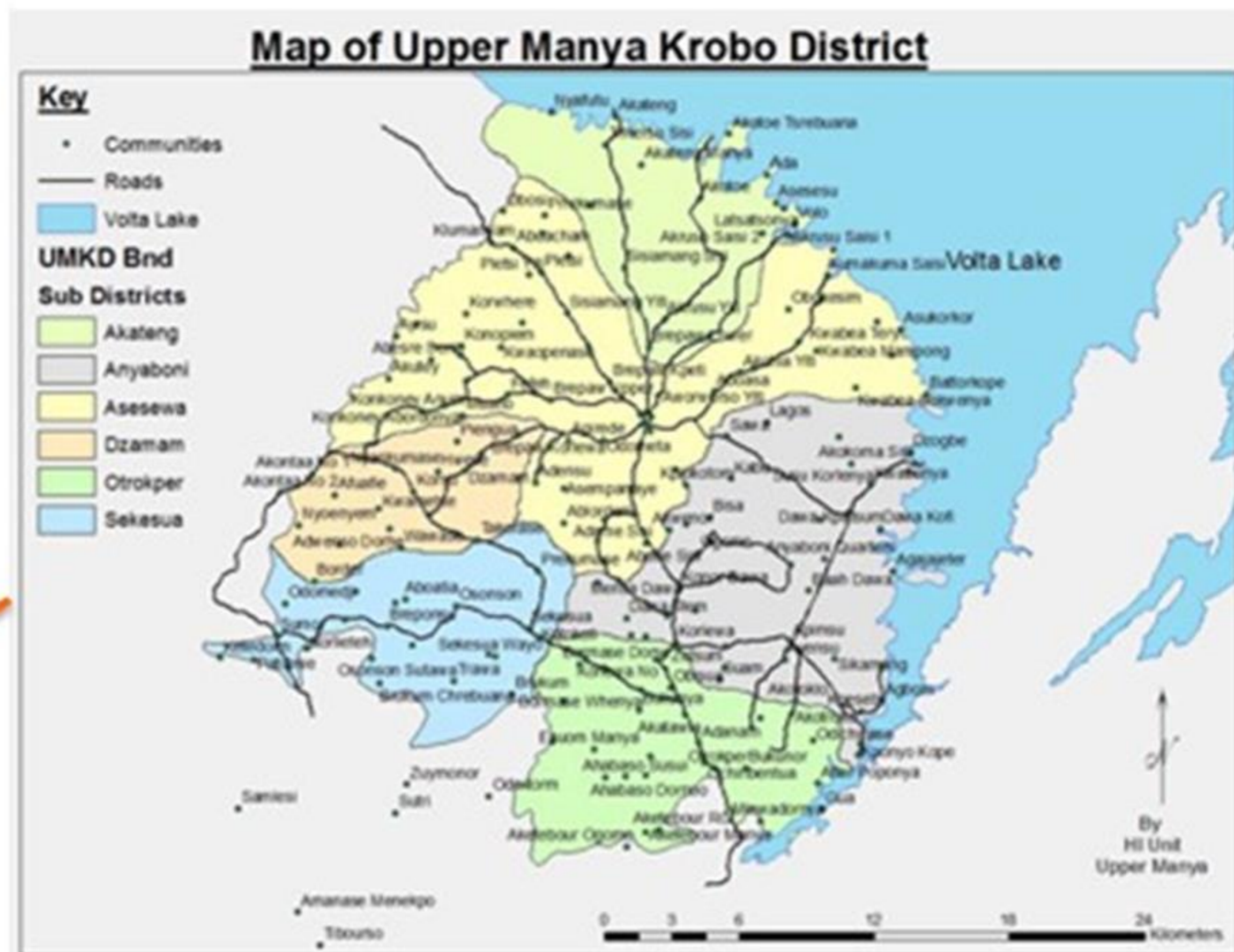
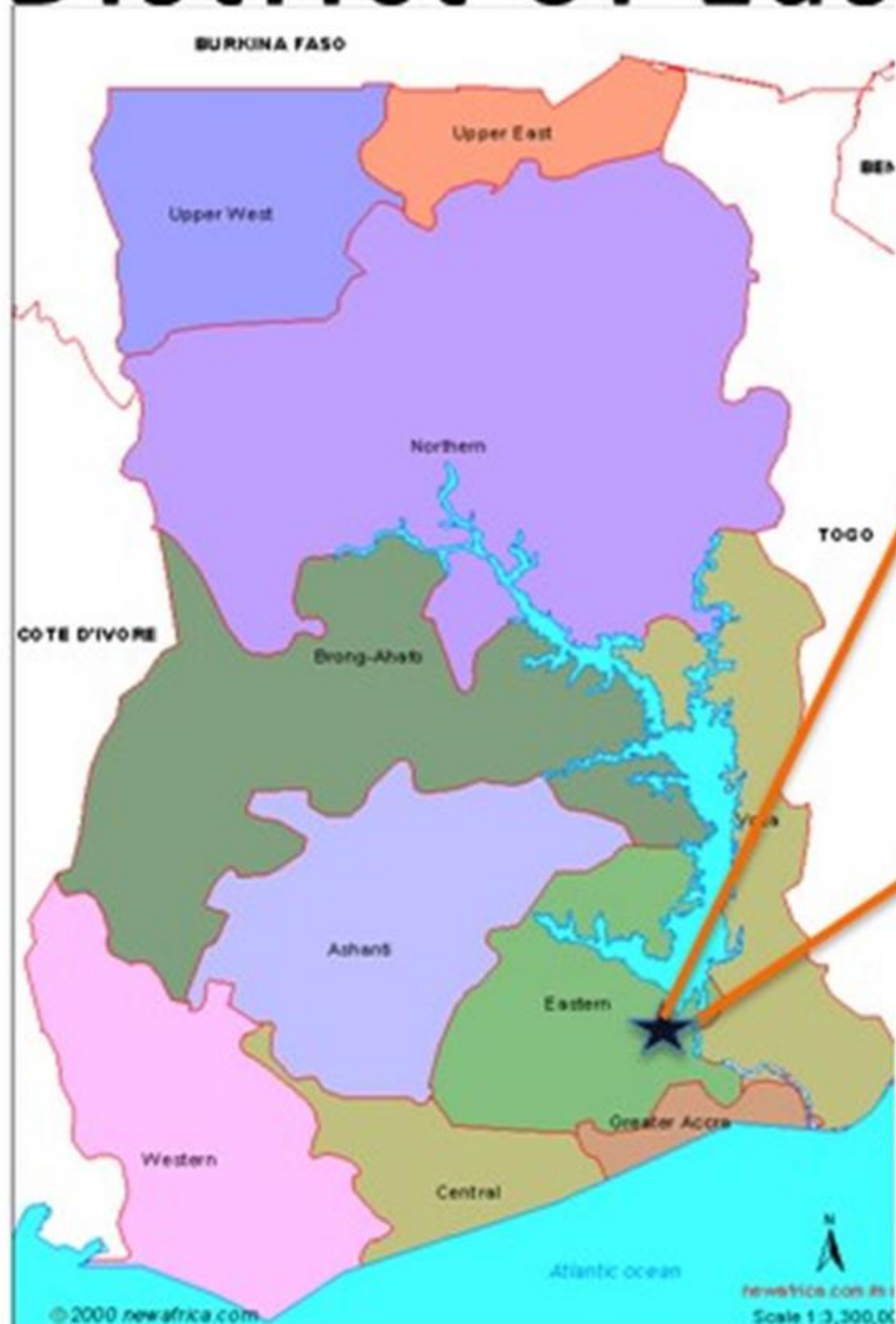
Heifer Ghana: Comfort Pinto, Kwesi Bodua

Additional thanks to Theresa Gyorkos (McGill), Carolyn MacDonald (CI) Loria Kulathungam, Margo Leach (WVI/ WV Canada); Population Council (Ghana) staff; Local Government institutions, Community leaders and members.



Steering Committee Participants

Project Location: Upper Manya Krobo District of Eastern Ghana



Nutrition Links

Project Objectives

- 1) To improve the quality of services provided by district institutions
- 2) To improve the health, social, and economic well-being of the most vulnerable populations, including infants and young children



Overview of Intervention Sites and Components

**Capacity
development of
institutions and
communities**

**6 sub-
districts**

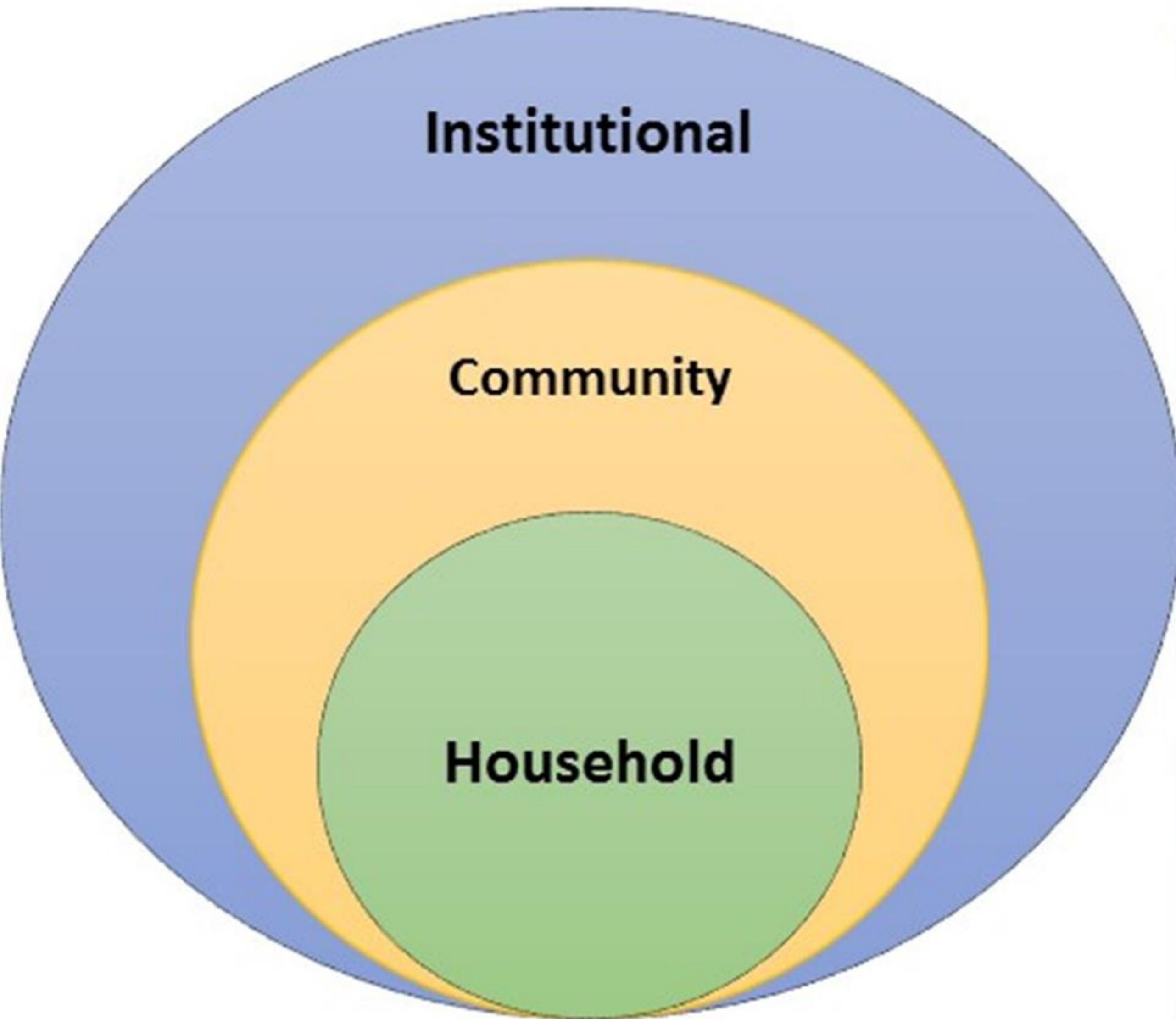
**Infant
households
intervention**

**3 sub-
districts**

**Adolescent
households
interventions**

**3 sub-
districts**

Capacity development at multiple levels



- Informed by:
 - Preliminary qualitative interviews with local institutions that identified gaps in knowledge and skills relative to:
 - Ability to collect, analyze and use information for decision making
 - Optimal service delivery of health services to communities
 - Addressing nutrition concerns
 - Training needs for infant and adolescent household interventions



Overview of Implementation Activities Timeline: Jan 2013 to Jan 2018

Institutional-level capacity development

Focal area	Groups targeted
C-IYCF – Community Infant & Young Child Feeding	Health Staff
CBGP – Community-Based Growth Promotion	
MtMSG – Mother-to-Mother Support Groups Formation	
IMNCI – Integrated Management of Neonatal and Childhood Illness	Health staff
iCCM – Integrated Community Case Management	
Harmonization and Mainstreaming Nutrition into different sectors	Agriculture Extension Agents UMK Rural bank
Lots Quality Assurance Sampling (LQAS) Methodology	GHS, GES, MOFA, NCCE, Social Welfare, and District Assembly (Env. Health, Planning)
Data analysis (Working in Excel)	
Gender and Diversity	



Community-level capacity development

Training Focal area	Groups targeted
Health and Nutrition	Community Members Mentors of the Adolescent Girls Clubs
Nutrition education via radio	Community members (esp. women)
Food Demonstration Sessions	
Mother-to-Mother Support Groups (MtMSG) Community-Based Growth Promotion	Community Health Volunteers (TOT) Group facilitators (mothers)
Gender and Diversity	Chiefs/elders/opinion leaders, infant intervention women groups, community members

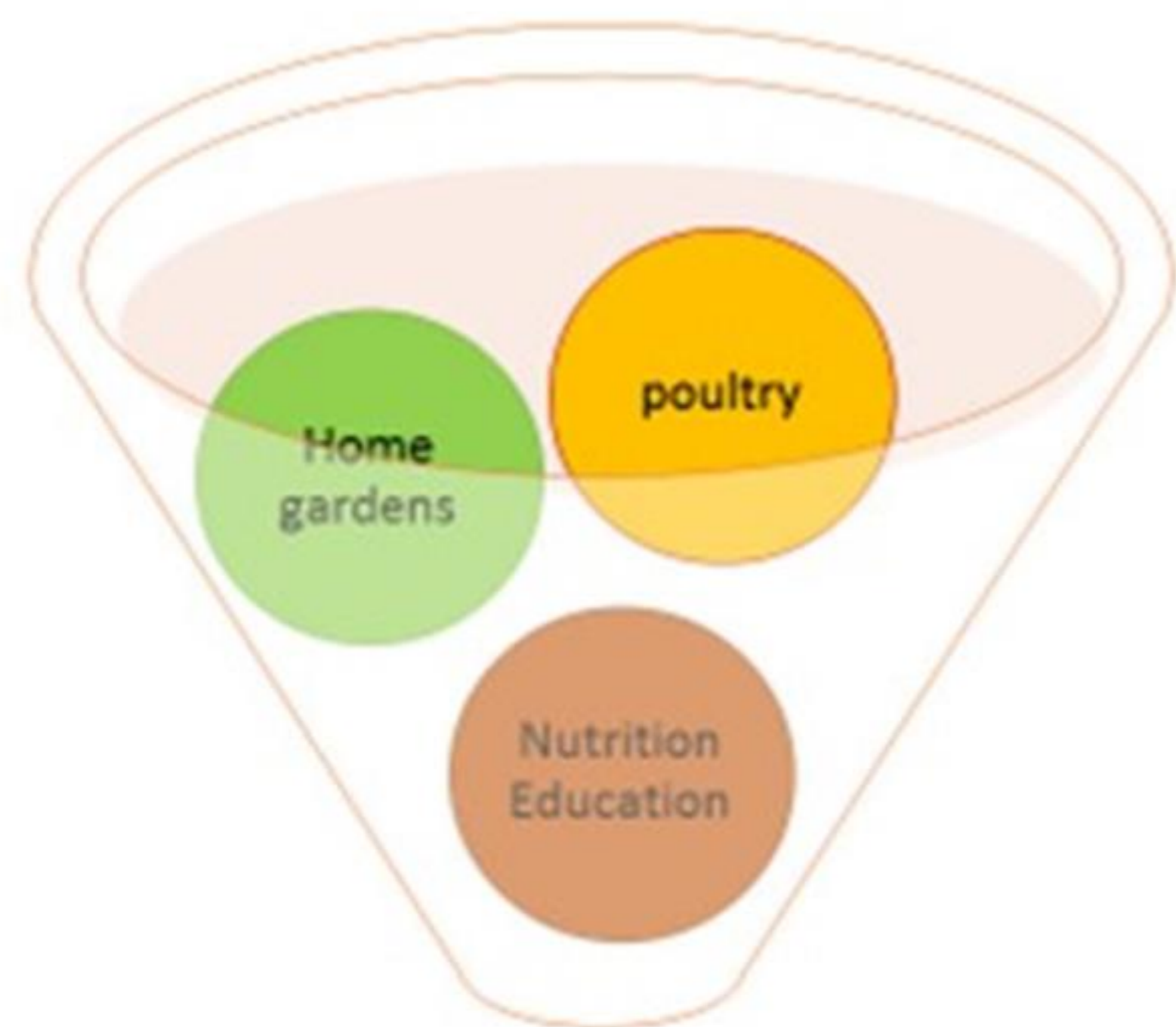


Infant Intervention Households



Intervention components

Intervention mix



**Improved child
and household
diet nutritional
status**



Home Gardens

Green leafy vegetables
Orange flesh sweet potatoes



Poultry

Household inputs: (Coop, upkeep (feed etc.)
Project inputs: 40/ layers, coop roofing,
1mo. Feed/ medication supply, technical
support , monitoring



Nutrition education

Optimal child feeding
Dietary diversity
Using garden vegs and eggs

Household-level capacity development

Topic	Groups targeted
Poultry coop construction	Infant intervention households
Vegetable garden construction and care	
Learning visits to vegetable demonstration garden at the Nutrition Centre	
Cooking demonstrations	
Training in bee keeping: swarm hiving and colony management	
Nutrition education on optimal child feeding practices	
Financial literacy, life skills, nutrition and environmental health & hygiene	Adolescents



Evaluations

Institutional and community capacity development activities

1. Pre- post training knowledge assessments (Institutions & CHVs)
2. Direct observations of practice of skills (MMSS with health staff & CHVs)
3. Qualitative (IDIs with institutional staff & FGDs with communities)
4. Before and after quantitative surveys (interactive radio intervention)

Infant and adolescent interventions

1. Annual surveys: intervention and control communities for Phase I & Phase II participants
2. Process monitoring of activities (process evaluation)
3. Qualitative: IDIs with MoH staff/CHV and FGDs with communities on child health & nutrition

Sample Sizes for Nutrition Links Infant & Young Child Surveys

Survey Type	Target Sample	Actual Completed	Field Period
District-Wide Baseline	1,200	1095	Nov 2013 – Jun 2014
District-Wide Midline	1,095	943	Feb 2015 – May 2015
District-Wide Endline	1,269	909	Mar – July 2017
Infant Interventions	Intervention	Control	Field Period
Baselines for Phase 1 and 2 combined	287	213	Jun – Aug 2014, Feb – Mar 2016
Endline for Phase 1 and 2 combined	247	181	Feb – Mar 2016, Mar – Jun, 2017

Achievements for Selected Indicators

Key Indicators	Target Achieved
# of trained health staff who take measurements & deliver targeted counseling accurately	130%
# of Staff trained in Nutrition Agriculture Health & Gender equity	99%
Percent of district program administrators using district data in decision making process	200%
Level of satisfaction of program administrators towards cross-sector programs	94%
# of infants and young children attending growth monitoring	24 (96%)
# of children receiving animal source foods in complementary foods	146 – 165%
Production of diverse micro-nutrient-rich plants for home use	36%
Use of safe and hygienic complementary feeding practices	27%