

Nutrition Impact and Positive Practice (NIPP): learning from the design and implementation of a multisectoral behaviour change approach in five sub-Saharan African countries

GOAL's vision:

GOAL believes in a world where poverty no longer exists, where vulnerable communities are resilient, where barriers to wellbeing are removed and where everyone has equal rights and opportunities.



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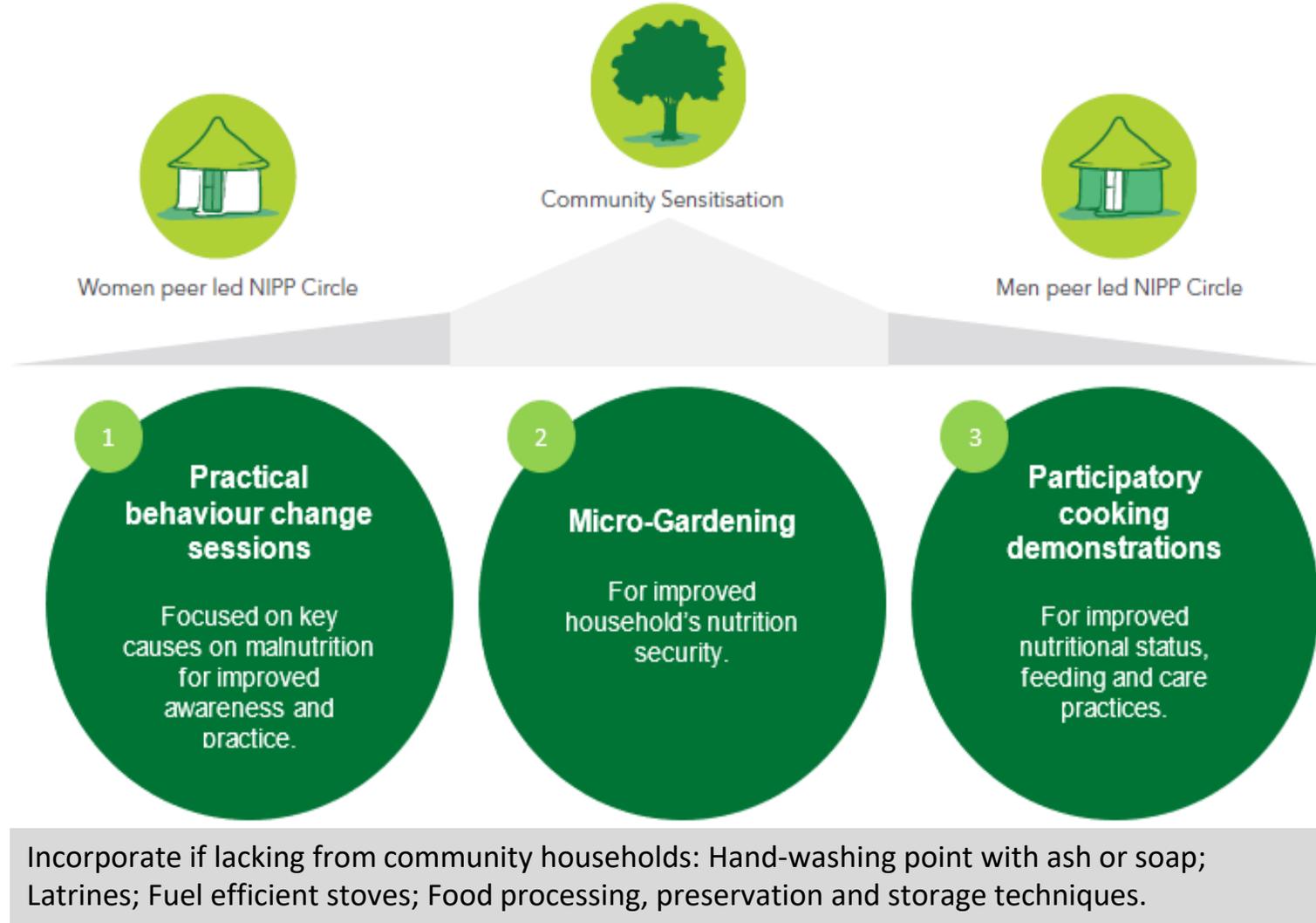
BACKGROUND

- GOAL designed NIPP in 2012 as a **gender sensitive and multi-sectoral** approach to fill a potential gap in the **nutrition prevention and treatment continuum of care**.
- NIPP addresses the **cross-sectoral underlying behavioural determinants** of malnutrition.
- Since 2012, NIPP has reached 31,012 female and male caregivers and their **111,160 household members** through 1,301 female and 689 male groups.



NIPP video on GOAL website

Formative research:
Situational and barrier analyses



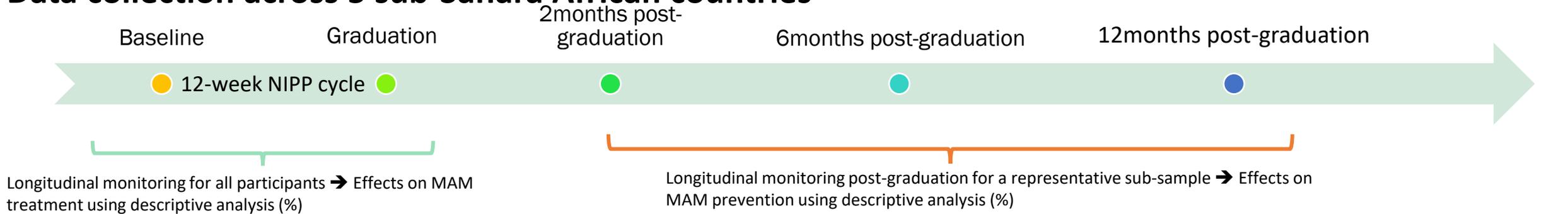
PURPOSE

GOAL conducted an internal multi-year and multi-country review of NIPP program using a mixed method:

1. To assess NIPP program effect in treating moderate acute malnutrition.
2. To assess NIPP program effect in preventing moderate acute malnutrition.
3. To generate programmatic evidence and learnings on moderate acute malnutrition treatment and prevention through multisectoral programming.

METHODS

Data collection across 5 sub-Saharan African countries



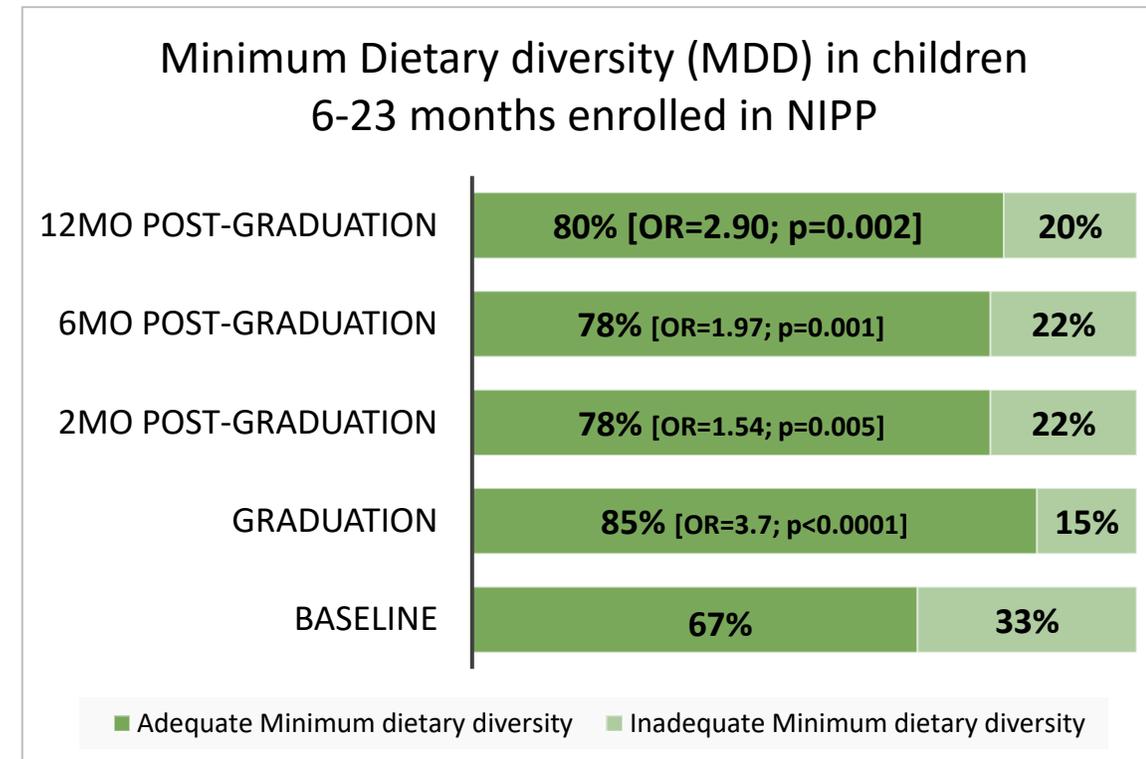
- Quantitative analysis (N=19,733): 25+ indicators on knowledge, behaviours and anthropometry on child and PLW
- Qualitative analysis (N=207): semi-structured interviews and focus group discussions with participants, facilitators and key stakeholders on process implementation, motivators and barriers to positive behaviours adoption.

Data analysis

- Retrospective cross-sectional analysis of enrolled children 6-59 months (N=9,717) and PLW (N=3,718) with complete data.
- Retrospective cross-sectional analysis of a representative sub-sample of children 6-59 months followed over 12 months after graduation (N= 407).
- Statistical analysis with EpiInfo™ (v7.2.4.4) : McNemar's test (paired case control) for categorical indicators and paired t-test for continuous indicators.

RESULTS: NIPP effects on knowledge, behaviour and practice

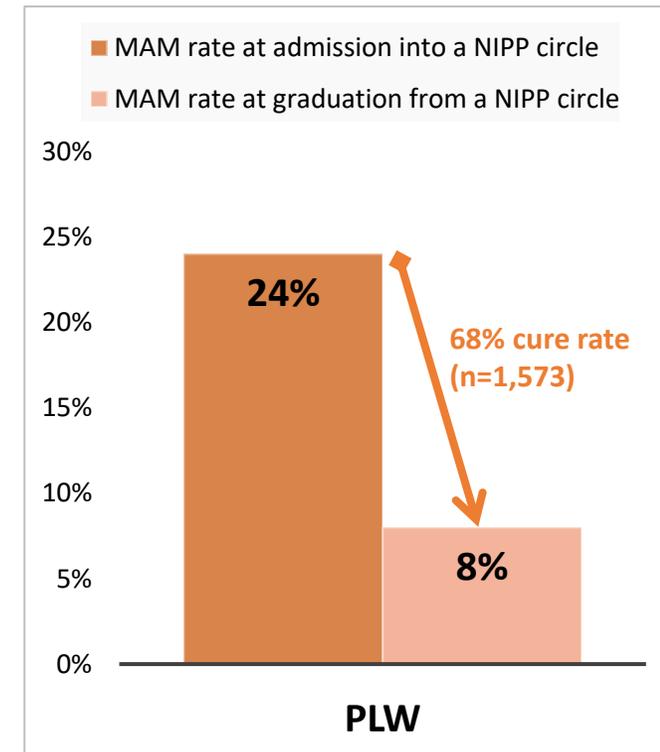
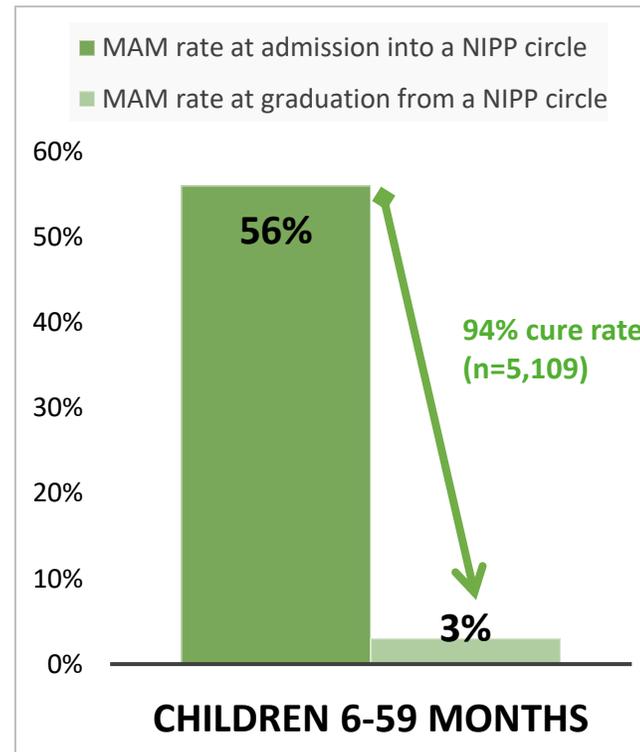
- Majority of the 25 knowledge and behaviour indicators analysed across care, feeding, hygiene-sanitation and micro-gardening had improved during NIPP.
- All were sustained or even increased 12-months post-graduation except micro-garden maintenance.
- The qualitative assessment highlighted that building and maintaining micro-gardens and latrines were the most challenging activities for participants across countries
 - latrine construction - need of assistance for construction (labour and material)
 - micro-gardening - access to water especially during the dry season and sustainable access to seeds after the project ends.
- Despite those challenges, the general experience was overwhelmingly positive for the whole community.



RESULTS: NIPP effects on MAM treatment in children and PLW

- MAM is defined as MUAC <125mm and \geq 115mm for children 6-59 months
- MAM is defined as MUAC <230mm for PLW
- MAM rates in children 6-59 months decreased from 56% at baseline to 3% at graduation
→ **94% cure rate (n=5,109)**
- MAM rates in PLW decreased from 24% at baseline to 8% at graduation
→ **68% cure rate (n=1,573)**

Moderate Acute Malnutrition (MUAC*) in children 6-59 months (N=5,410) and PLW (N=2,321) between baseline and graduation



STRENGTHS AND LIMITATIONS

- Strengths

- Aggregated datasets from 5 sub-Saharan African countries.
- Extensive NIPP dataset including over 25 indicators on knowledge, behaviours and anthropometry.
- NIPP longitudinal monitoring data is of good quality.
- Qualitative assessment provides valuable insights from female and male caregivers and their community as a whole.

- Limitations

- Absence of a control group for both children and PLW.
- The 12-month post-graduation data (n=407) is considerably lower than at baseline (N=9,717). This restricted the type and depth of quantitative analysis and lost-to-follow up might have impacted the 12-month post-graduation analysis.
- Findings do not reflect the potential impact of COVID-19 as the data presented is from up to December 2019.

CONCLUSION

- This review has provided some evidence basis on community-based treatment and prevention of MAM using the NIPP approach. Additional evidence is expected from the [ONCE study, a RCT involving NIPP in Uganda.](#)
- To support the continuum of MAM treatment and prevention at community level, countries with a high burden of malnutrition should be encouraged to test and tailor NIPP to their context. The NIPP guidelines developed by GOAL are accessible on [NIPP webpage.](#)
- These findings will be used by GOAL globally to pursue advocacy for NIPP scale-up.
- To contribute more broadly to food and nutrition security, GOAL leverages years of experience implementing NIPP to design and pilot in Niger and Uganda an integrated approach (S4Nut) utilising SBC, Market systems Development and Financial Inclusion.



Thank you



For more information:

GOAL: www.goalglobal.org/
NIPP: www.goalglobal.org/nipp

Conference hashtag: [#ANH2022](https://twitter.com/ANH2022)
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