

Project Compilation Report

SUAAHARA-II Good Nutrition Program

Supported/Funded by: HKI/USAID

Duration: September 2016 – October 2022

Report Data: 10th November 2022

1. Executive Summary

The SUAAHARA-II programs, implemented across 13 municipalities in Kailali District, Nepal, aimed to combat malnutrition through integrated health, agriculture, governance, and gender-focused interventions. Over six years, the project achieved transformative outcomes, including **improved maternal and child health behaviors, enhanced access to nutrient-rich foods, and strengthened local governance systems**. Key highlights include:

- **19,000+ Key Life Events (KLEs)** conducted, reaching **58,000+ participants** with critical health messaging.
 - **10,000+ households** trained in Homestead Food Production (HFP), boosting dietary diversity.
 - **100% of municipalities** institutionalized Nutrition and Food Security Steering Committees (NFSSCs).
 - **45% reduction in Severe Acute Malnutrition (SAM)** cases through improved case management.
 - **NPR 15,000,000+** allocated by local governments for nutrition-specific initiatives.
-

2. Project Overview

Objective: Improve nutritional outcomes for mothers, children under 2, and adolescents through multi-sector collaboration.

Target Groups:

- Pregnant and lactating women.
- Children under 2 years.
- Marginalized communities (DAG groups).

Key Strategies:

- **Behavior Change Communication (BCC):** Food demonstrations, KLEs, and tele-counseling.

- **Capacity Building:** Training for health workers, FCHVs, and Village Model Farmers (VMFs).
 - **Governance Strengthening:** Institutionalizing NFSSCs and local sustainability plans.
 - **Climate Resilience:** Promoting climate-smart agriculture (e.g., rainwater harvesting, mulching).
-

3. Key Achievements by Intermediate Results

IR1: Improved Household Nutrition and Health Behaviors

- **Food Demonstrations:** 10,000+ sessions conducted, promoting nutrient-dense recipes like *Posilo Jaulo* (mixed grain porridge).
- **Key Life Events (KLEs):** 19,000+ events celebrated, emphasizing antenatal care, breastfeeding, and complementary feeding.
- **Vitamin A Campaigns:** 95% coverage achieved in target areas, reducing childhood blindness risk.
- **COVID-19 Adaptations:** 5,000+ households received tele-counseling and hygiene kits.

IR2: Increased Use of Quality Nutrition and Health Services

- **IMAM Training:** 600+ health workers and FCHVs trained to manage acute malnutrition.
- **Quality Improvement (QI):** 85% of health facilities adopted QI tools, improving service delivery.
- **Routine Data Quality Assessments (RDQA):** 30+ facilities improved reporting accuracy using digital tools.

IR3: Improved Access to Diverse and Nutrient-Rich Foods

- **Homestead Food Production (HFP):** Distributed **5,000+ vegetable seed packets** and **2,000+ poultry kits** to households.
- **Climate Resilience:** 100+ VMFs adopted climate-smart practices (e.g., tunnel farming, solar drying).
- **Egg Promotion Campaigns:** Partnered with 25+ local traders, increasing egg consumption by **35%** in DAG communities.

IR4: Accelerated Rollout of the Multi-Sector Nutrition Plan (MSNP)

- **Governance:** 100% of municipalities formed NFSSCs, integrating nutrition into local budgets.

- **Sustainability Workshops:** 20+ workshops led to **50+ locally funded initiatives**, including micro-irrigation projects.
 - **NFLG Campaigns:** 10 municipalities declared "Nutrition-Friendly Local Governance."
-

4. Cross-Cutting Themes

Gender Equality and Social Inclusion (GESI)

- **Male Engagement:** 1,500+ fathers/grandfathers participated in men-only discussions on maternal health.
- **GESI Champions:** 50+ champions trained to address cultural barriers (e.g., early marriage, food taboos).

Public-Private Partnerships (PPP)

- Collaborated with Agro-vets, cooperatives, and egg producers to enhance resource accessibility.
- Leveraged **NPR 2,000,000+** from private sector contributions for nutrition campaigns.

COVID-19 Response

- Distributed **10,000+ PPE kits** and conducted **200+ virtual HMGs** to ensure continuity.
 - Trained 500+ health workers on pandemic-safe service delivery.
-

5. Challenges and Adaptive Measures

- **Staff Turnover:** Addressed through staggered training and mentorship programs.
 - **Geographic Barriers:** Mobile health camps and tele-counseling expanded reach to remote areas.
 - **Cultural Practices:** Community dialogues and GESI tools reduced resistance to behavior change.
-

6. Lessons Learned

- **Local Ownership:** Municipalities allocated **NPR 15,000,000+** for nutrition after capacity-building workshops.
- **Hybrid Delivery:** Blended in-person and digital methods sustained engagement during crises.
- **Data-Driven Decisions:** RDQA tools improved accountability and program adjustments.

7. Sustainability and Recommendations

Sustainability Measures:

- NFSSCs operational in all municipalities with annual nutrition budgets.
- Local governments adopted SUAAHARA's HFP and QI frameworks.

Recommendations:

- Scale digital platforms for real-time monitoring.
 - Strengthening linkages between health facilities and agriculture extensions.
-

8. Financial Overview

- **Total Budget:** NPR 150,000,000 (USD 1.2M)
 - **Expenditure Breakdown:**
 - **45%:** Community interventions (KLEs, food demos).
 - **30%:** Capacity building (training, coaching).
 - **15%:** Governance and sustainability.
 - **10%:** COVID-19 adaptations.
-

9. Annexes-Key Activities

1. Food Demonstration program
2. Key Life event celebration program
3. FCHV Level IMAM training
4. Peer Facilitator refresher training
5. Celebration Vitamin A campaign
6. Support formation and orientation on nutrition of municipality level NFSSC (in line with MSNP II)
7. Local level planning process
8. M/RM level quarterly review and planning meeting of NFSSC committee
9. MAM cases and counsel them on child feeding and care

10. SAM cases and counsels them on child feeding and care
11. Review meeting with district and municipality-level government and non-government agricultural, livestock stakeholders and private sector
12. Interactions among municipal agriculture and livestock coordinators, local private stakeholders, HFPB group members, VMFs and LRPs to discuss HFP related issues, identify solutions, and build linkages
13. PC/FC facilitate the regular functioning of meetings municipality level Nutrition and Food Security Steering Committee (NFSSC)
14. Sustaining nutrition and health interventions at local level workshop
15. District level orientation on Covid-19 to Health coordinators
16. Orientation on Adolescent IFA supplementation to FCHVs
17. Onsite coaching on Routine Data Quality Assessment (RDQA)
18. Reflection meeting with GESI champions and discuss men's role in improving health and nutrition of 1000-day women and children
19. Orientation meeting with selected GESI champions on running men-only group discussions
20. GESI champions conduct discussion meetings with 1000-day fathers and grandfathers on maternal/child health, nutrition, and GESI barriers
21. CHSB review at health facilities (coordination with stakeholders) and orientation on GESI tools/perspectives
22. VMF network meetings to review resilience plans and link with private sector actors/government programs
23. Comprehensive Nutrition Specific Interventions (CNSI) district-level ToT training
24. Collaboration with local governments/stakeholders during International Women's Day (health/nutrition focus)
25. District Level Review and planning meeting with MNF, CNF
26. Design/Plan and learning-sharing workshop with HCs, HF in-charge, nutrition focal persons, and local leaders
27. Interactive meeting/planning at HF level to improve GMP activities
28. Coordinate and advocate at municipal level to improve WASH (water treatment, handwashing, sanitation)
29. MNFs/CNFs support community WASH events/campaigns

30. Review and planning meetings with OTC and NRH staff to strengthen NACS/IMAM services
 31. Two-day training for CB-IMNCl coaches on MIYCN/IMAM programs
 32. Participatory interaction meeting and onsite coaching at health facilities (QI for nutrition/health services)
 33. Routine Data Quality Assessment (RDQA) aligned with GON/FWD workplan
 34. Workshop to design Quality Improvement (QI) efforts for nutrition services
 35. Implementation of QI standard tools at health facilities
-

End---