



Figure 1 Zenaba M. Hassan pours water on an irrigation rivulet under the instruction of Abdelkerim Youssouf, Concern fieldworker

## Integrating nutrition and food security programming

Sharing good practices –  
Chad / 2012-2015



### SECTION 1: OVERVIEW.

Title of project/programme/initiative	Community Resilience to Acute Malnutrition - Résilience Communautaire à la Malnutrition Aigüe (CRAM)		
Implementing/responsible organisations(s)	Concern Worldwide		
Geographical Coverage (region, country, area)	Sila Region, Eastern Chad (Goz-Beida)		
Duration of project/programme/initiative:			
Start date: November 2012		End date: December 2015	Ongoing: <input checked="" type="checkbox"/>
Contact person (name, e-mail):	Nena Lafuente, Country Director Chad, Concern Worldwide chad.cd @concern.net		
Humanitarian context (i.e. emergency response, post-crisis, resilience-building):	Resilience building		
Type of context (urban, rural, camps, ...):	Rural – in an area with recurrent food crises and droughts.		
Phases of humanitarian project cycle. Please tick boxes in the list below (several choices possible)			
<input type="checkbox"/> Situation analysis <input type="checkbox"/> Response analysis <input checked="" type="checkbox"/> Project design		<input checked="" type="checkbox"/> Project monitoring <input checked="" type="checkbox"/> Evaluation <input checked="" type="checkbox"/> Impact assessment	
Number of household beneficiaries and target groups (i.e. women, pastoralist, children under five, etc.)	<p>The programme is implemented in 35 villages of Goz Beida Sub-prefecture, Kimiti department, Sila Region. Direct beneficiaries: 20,090 (10,361 females and 9,729 males) located in the 35 villages of intervention.</p> <p>If an emergency response is implemented, 88 villages of the sub-prefecture are targeted, for an approximate total number of 45,032 (22,966 females and 22,066 males)</p>		
Main topic(s). Please tick boxes in the list below (several choices possible)			
<input checked="" type="checkbox"/> Livestock and Nutrition <input type="checkbox"/> Cash Transfer Programming and Nutrition <input checked="" type="checkbox"/> Nutrition counselling / education <input checked="" type="checkbox"/> Diversifying local production <input checked="" type="checkbox"/> Supporting local livelihoods <input type="checkbox"/> Nutrition sensitive value chains (including bio/fortification) <input checked="" type="checkbox"/> Micronutrients-rich food and crops <input checked="" type="checkbox"/> Income Generating Activities and nutrition <input type="checkbox"/> Food aid and nutrition		<input type="checkbox"/> Urban settings and nutrition <input type="checkbox"/> Joint Food Security and Nutrition assessment <input checked="" type="checkbox"/> Multi-sectoral planning for nutrition <input checked="" type="checkbox"/> Joint implementation <input type="checkbox"/> Others. Please specify: -Improved agricultural production -Access to and use of health and nutrition services -Diversifying Livelihoods and Assets -Enhancing links to local markets	

## SECTION 2: PROJECT/PROGRAMME/INITIATIVE DESCRIPTION

<p>Main objectives of the project including nutritional objectives (please specify if these objectives are included in the logical framework)</p>	<p>The overall goal of the programme is to improve health, nutrition and livelihood security as well as community resilience to shocks for the rural population of Sila Region, Eastern Chad.</p> <p>Objectives as per the programme log frame/ result framework:</p> <ul style="list-style-type: none"> <li>• Improved food security; diversified livelihoods; and coping strategies</li> <li>• Improved access to and use of health and nutrition services, safe water, hygiene and sanitation</li> <li>• Improved nutritional status of vulnerable groups (i.e. pregnant and lactating women and under 5 children)</li> <li>• Increased participation of women in management of assets at the household and community level</li> <li>• Improved food production</li> <li>• Social and Behaviour Change on key areas</li> <li>• Establishment of a functioning Early Warning System</li> <li>• Undertake an effective emergency response</li> <li>• Undertake quality research, impact assessment, monitoring and appropriate advocacy</li> </ul>
<p>Main food security and nutrition issues addressed by the project (including issues of target groups, causes of food insecurity and malnutrition)</p>	<p>Chad was affected by the 2012 Sahel food crisis. During the peak of the food crisis 28% of the population was moderately food insecure and 14% severely food insecure. In the Sila region where Concern works, the proportions rose to 47% and 18%, with lack of food, health services, water and sanitation resulting in high Global Acute Malnutrition (GAM) rates of 16.3% and Severe Acute Malnutrition (SAM) rates of 2.5%.</p> <p>The Sila region is extremely vulnerable to environmental shocks and in terms of periodic hazards, in the more northerly areas, poor or irregular precipitation can be expected one year in three. The usual irregular pattern of rainfalls determines also a frequent risk of flooding in some parts of Goz Beida sub-prefecture. This can lead to chronic cereal deficits. In addition poorly functioning markets leading to large seasonal price variations and a lack of assets or other livelihood options make it difficult to maintain food stocks.</p> <p>In Concern's specific area of intervention, the more northerly area is identified as being in some degree of food deficit two years in three, due in part to the fact that much of the production from this zone is sold off to other zones. This also partly reflects rainfall performance, with greater problems of late start and poor distribution of showers towards the north of the zone where mean annual precipitation is down to 300mm.</p> <p>In addition, the FEWSNET livelihoods profile for Chad identifies one of the chronic hazards across the region as being crop damage from endemic pests, while typical diseases of livestock are pasteurellosis in cattle and sheep, peripneumonia in goats, and Newcastle's in chickens and guinea-fowl.</p> <p>As a consequence, the programme addresses issues of poor food availability caused by droughts and flooding, as well as poor access to potable water, hygiene and sanitation, poor access to health and nutrition services, and incorrect behaviour in health and nutrition care.</p>
<p>Implementation process and activities</p>	<p>The programme is designed as a multi-sectorial integrated programme addressing the major causes of malnutrition and under-nutrition by strengthening community resilience to shocks by producing more and diversified foodstuffs, strengthening community management of malnutrition, improving the quality and access to water and sanitation, and improving sanitary behaviour.</p>

	<p>In addition, due to the nature of the region, and the knowledge that there are frequent weather related shocks, the programme will also develop an Early Warning System (EWS) to facilitate emergency preparedness once thresholds have been passed. Last, but not least, the programme is developing a DRR component aiming at the reinforcement of local communities and authorities to identify hazards and risks, and to have an emergency response plan in place.</p> <p>The activities of the programme are:</p> <p><u>A Food, Income and Markets</u></p> <ol style="list-style-type: none"> <li>1. Conservation Agriculture</li> <li>2. Promotion of Homestead Gardening</li> <li>3. Provision of Small Scale Irrigation Schemes</li> <li>4. Integrated pest management</li> <li>5. Provision of extension messages to farmers</li> <li>6. Decreasing post-harvest losses and improving storage capacities</li> <li>7. Improved animal husbandry practices</li> <li>8. Supporting income generating activities</li> <li>9. Support the development of the Private Sector in rural areas</li> <li>10. Training of Animal Community Health Workers</li> <li>11. Improvement of animal care quality (establishment of a veterinary pharmacy)</li> </ol> <p><u>B Health &amp; Nutrition</u></p> <ol style="list-style-type: none"> <li>12. Building the capacity of Community Volunteer Health Workers</li> <li>13. Introduction of Care Group Methodology</li> <li>14. Community management of health care delivery</li> <li>15. Strengthen the management of the district health services</li> <li>16. Support to Mobile Clinics when thresholds are passed</li> <li>17. Borehole drilling, at village and Health Centre level</li> <li>18. Small water conveyance systems in Health Centres</li> </ol> <p><u>C WASH</u></p> <ol style="list-style-type: none"> <li>19. Water quality analysis</li> <li>20. Promotion of CLTS and PHAST approaches</li> <li>21. Introduction of ECOSAN blocks</li> <li>22. Environmental sanitation and hygiene promotion</li> </ol> <p><u>D Mainstreaming</u></p> <ol style="list-style-type: none"> <li>23. Gender and HIV/AIDS mainstreaming</li> <li>24. Social Behaviour Change activities (KAP surveys; barrier analysis; community mobilisation)</li> </ol> <p><u>E Emergency Preparation and Response</u></p> <ol style="list-style-type: none"> <li>25. Establishment of an Early Warning System</li> <li>26. Disaster Risk Recovery</li> <li>27. Emergency response activities dependent on the crisis- eg: <ul style="list-style-type: none"> <li>• Mobile clinics</li> <li>• Seeds distribution</li> <li>• Impregnated Mosquito nets distribution</li> <li>• Blanket feeding</li> <li>• Cash transfers / Vouchers</li> <li>• NFIs distribution</li> </ul> </li> </ol>
Actors/coordination mechanisms involved	<p>Concern works with the Feinstein Centre at Tufts University (Boston) to develop the programme research protocol, carry out the data collection and analysis, and to produce impact assessment and quality reports.</p> <p>At the operational level, Concern involves all line ministries including Ministry of Health, Ministry of Agriculture and Environment, Ministry of Livestock and of</p>

	<p>Hydraulic through their Regional Delegations.</p> <p>Regular coordination is done through meetings with authorities, DONG, relevant Ministries, other NGOs, UN agencies, such as bilateral meetings, cluster meetings, meetings within other established platforms.</p> <p>At the policy making level, regular coordination is done through bilateral meetings with authorities of DONG, line Ministries, other NGOs, UN agencies and through, cluster meetings.</p> <p>At meso level, Concern is carrying out its health and nutrition activities through the support to the Health Delegation of Sila, as part of a MoU. Concern is also working closely with regional representations of ONDR (Ministry of Agriculture), Ministry of Animal Resources, Ministry of Hydraulic and Pastoralism, and the CLA (Comité Local d'Action) within the DRR programme. An MoU with the ONDR, the CLA and other potential relevant counterparts will be put in place in 2015 with a view to reinforce collaboration.</p> <p>Regular coordination is done with local authorities, such as the Prefect of Kimiti Department, and the sub-prefect of Goz Beida, in particular.</p> <p>At a micro level (community level) Concern works closely with community leaders and other community representatives to assist with the management of the interventions.</p>
<p>How gender and accountability are taken into consideration?</p>	<p>Women are targeted through ensuring their involvement in community management groups such as Water Point Management Committees, Mother-to-Mother Support Groups, CHWs groups, Market Gardening Committees, Action Community Committees.</p> <p>Specific indicators have been identified to measure increased participation of women in management of assets at both households and community level. Awareness-raising sessions take place on the importance of improving women's control over assets, as well as following up on this to address issues around behaviour change.</p> <p>Ad Hoc questionnaires and scales have been designed to measure these indicators. Gender is mainstreamed in all Project phases, thanks also to a good presence of female field agents and supervisors among Concern staff. Concern ensures that messages on gender equality target both men and women, creating a space to discuss issues with men, and influence their attitudes and behaviours.</p> <p>Agricultural technical and business skills will promote economic empowerment and influence their roles in decision making at the household level.</p> <p>All programme managers have the responsibility to ensure accountability of their intervention to programme participants– all methods, objectives, targeting and financial investments are explained, communicated in appropriate ways to beneficiaries and indirect beneficiaries so they know what their rights are and what they can and cannot expect. As illiteracy is very high in the programme area, innovative ways to ensure the community has sufficient information on their rights and entitlements will be developed including the use and development of socially appropriate picture messages. Community members that are not beneficiaries are also given information about why they were not selected.</p> <p>Concern is part of the HAP (Humanitarian Accountability Partnership) and has been recently re-certificated. Accountability is guaranteed towards all programme participants.</p>

	<p>Programme Managers are also responsible for developing a community based complaints response mechanism to ensure a safe and confidential mechanism for community members (both beneficiary and non-beneficiary) to feedback abusive or inappropriate behaviour and other feedback on the programme. Written documents will also be translated into Arabic language and available for beneficiaries and other stakeholders.</p> <p>Last, stakeholders will participate into the revision process for 2014, and will be asked to input into the planning for 2015.</p>
Specific tools/methodology (developed or used)	<p>DDR; Digital Data Gathering (DDG); GIS and Mapping; focus group discussions; community conversations; PRA (Participatory Rural Appraisal); SBC (Social Behavior Change) techniques; RBM (Results Based Management)</p>

### SECTION 3: LESSONS LEARNED IN INTEGRATING FOOD SECURITY AND NUTRITION PROGRAMMING

How the outcomes/ impacts has been measured (process and indicators; existence of base/endline)	<p>A comprehensive baseline survey took place in October / November of 2012 and a mid-line survey was conducted in October/November 2013 on a reduced sample and selection of indicators. Currently, a comprehensive mid-line survey is taking place (due to finish in December 2014) and an end-line survey will be conducted in same period of 2015. This forms the basis of how the achievement of the planned programme results will be measured. New indicators will be added with the beginning of new activities when necessary. The surveys have been designed by Tufts University to ensure a high degree of rigour.</p> <p>Results Based Management (RBM) is the core of Concern's approach, aiming at improving the quality and the impact of activities on the basis of results achieved, lessons learnt, recommendations.</p> <p>Besides, regular M&amp;E (Monitoring and Evaluation) activities are carried out (daily, weekly, monthly) according to an approved M&amp;E framework. KAP (Knowledge Attitude and Practice) surveys and impact assessments are also regularly organised. SMART and SQUEAC/SLEAC surveys are held every year, and PDMs (Post Distribution Monitoring) are carried out in case of distributions.</p> <p>The programme will also include a detailed process of evaluation at the end of its implementation to examine the implementation of the programme where external stakeholders will also participate and input.</p>
Main results/impacts achieved	<p>Indications of success or otherwise from the CRAM programme will start to come through in December 2014/January 2015 following the on-going midline survey. The most recent data collection took place in November 2013.</p> <p>The evidence from data collected in November 2013 showed improved food security at household level, namely with the reduction in the % of households who report not having enough food for five or more months of the year. The baseline value was 52.7% and this has seen a drop to 35%, as well as the mean number of months per year of inadequate food dropping from 5 to 4.</p> <p>With regard to households improved access to and use of health and nutrition services, safe water and sanitation, the proportion of households accessing 15 litres of water per person per day has increased from 11% to 14%, while the % of households defecating on open air passed from 47% to 23%</p> <p>The percentage of children under five with SAM receiving nutritional support has</p>

	<p>also increased from 13% to 40% (measuring enrolment rates into treatment programmes over the two weeks prior to survey).</p> <p>The percentage of children under 5 receiving appropriate dose of Vitamin A rose from 25% to 85.1%, and the % of children under 5 receiving measles vaccination passed from 17% to 48%.</p> <p>The % of households who know the 2 most critical times for hand washing passed from 18% to 45%.</p> <p>Percentage of women in targeted villages exclusively breastfeeding children under 6mths in the last 24 hours rose from 14% to 20%.</p>
<p><b>What has worked and was has NOT worked or difficulties and why?</b></p>	<p><b>What worked well</b></p> <p>Concern has established good relationships with Government structures and other Organizations/stakeholders operating in the same sector at National and / or Regional level through formal Memorandums of Understanding or tacit collaborations which highlight and harmonize implementation of activities at community level. This strategy helped to maximize in-country knowledge and available resources, improved the quality of implementations and reinforced and supported formal state structures.</p> <p>Joint meetings have been regularly organized to discuss on areas of improvement and base our future action on the basis of lessons learnt.</p> <p>The presence of field agents who regularly follow up activities at field level helps maximizing the impact and sustainability of learning and behavior changes.</p> <p>Through our participatory approach and the regular monitoring of field animators, the communities have easily adhered to the project and participate actively to sensitization meetings. Awareness is evident and outcomes will be shared after having finalized the ongoing Midline survey report.</p> <p><b>What didn't work</b></p> <p>A constraint of staffing (gaps at both national and international level) has caused a delay in the implementation of some activities (especially in livelihood project).</p> <p>Because of the above-mentioned staffing constraints, lack of time for the existing staff has slowed down the process of strengthening of the integrated approach, which is nevertheless on-going (see below).</p>
<p>Main enabling/success and hindering/failure factors</p>	<p><b>Challenges:</b></p> <p>One of the key challenges is the limited financial and human resources capacity of the Sila Regional Health Delegation, and the fact that Goz Beida Health District has great difficulties in hiring and retaining qualified staff for health service delivery, which compromises communities' access to health services. At the moment, there has not been a policy for human resources retention in the ministry of health especially for remote areas with very harsh living conditions.</p> <p>There have also been recurrent shortages and breaks-up in the MoH medical and nutritional inputs chain, which meant that some of the drugs, supplements and Plumpynut that are essential for the health and nutrition project are not always available.</p> <p>The geography of the territory, and the lack of road infrastructures imply that a vast part of Concern's area of intervention is not accessible for 3 to 4 months a year during the rainy season, that is the lean season, when needs increase.</p>

	<p>Ensuring the involvement and representation of women in programme activities has proven difficult for cultural and social well-rooted norms. The high level of illiteracy also makes all processes slower and impacts weaker (for this Concern is planning to start a programme for adult literacy which will target mostly women who are members of the community-based bodies created through our activities).</p> <p>Concern has also experienced internal staffing problems with both national and international staff. Overall, a great need is registered for capacity building and resilience strengthening of institutions also.</p> <p>At times, the low capacity and quality of suppliers and service/works providers has been a critical factor impacting on final results.</p> <p>Getting Concern staff, who are still structured in sector-specific teams (FIM, NUT, WASH), to work together in a truly integrated fashion rather than simply coordinating activities requires a mind-shift that is difficult to achieve when there are significant work pressures.</p> <p><b>Success factors:</b></p> <p>Concern's integrated approach includes Nutrition, Food Security and WASH activities, accompanied by SBC techniques. The multidimensionality of malnutrition necessitates a multi-sectorial programme to be effectively addressed.</p> <p>The deep knowledge of the area of implementation of Concern and the strong relationship of trust built with the target communities allows for a quality and more sustainable work to be carried out.</p> <p>Despite the limited financial and HR capacity of the Regional Delegation, Concern has established a very positive collaboration with the delegation and Health district management which has brought positive results.</p>
<p><b>Key messages to communicate :</b></p>	<p>The multidimensionality of malnutrition can only be addressed through an integrated approach that addresses all its major causes. For this reason, the CRAM model is based on the integration of the three components (Health/Nutrition, food security/livelihood and WASH) which resulted into synergies, maximization of resources and of impact in the field.</p> <p>Food security/livelihood and WASH platforms have been put in place as pair educators for awareness rising on Health and Nutrition issues including consumption of a balanced diet to fight malnutrition.</p> <p>Close collaboration between the food security/livelihood and Nutrition departments resulted into the designing of the vegetable gardening activity which strongly included the nutrition requirements of the beneficiaries to define the variety of seeds to distribute. Other activities which are being carried out with an integrated approach are ECOSAN latrines; sensitization of livestock herders; and training of CVAHWs. However, in future all activities will be implemented with an integrated approach, which will highlight the interconnection of the 3 Concern sectors of implementation in the fight to malnutrition.</p> <p>The hand washing campaigns held in CRAM villages were carried out jointly by the WASH and Health / Nutrition department in order to provide the audience with a comprehensive package of hygiene and health messages.</p> <p>Vulnerability to malnutrition has been the entry point for targeting beneficiaries of the food security/livelihoods and WASH interventions including seeds and</p>



	<p>gardening tools distribution, boreholes drilling among others.</p> <p>An “integration declaration” and Standard Operating Procedures are being developed by Concern staff to define how Concern sees integration and to set the main steps for an integrated approach.</p>
Recommendations for the up-scaling of successful practices	<p>The CRAM model formed the basis of a proposal made in 2014 by Concern Worldwide in partnership with Tufts University, ICRAF and local partner Al Massar (Sudan), for DFID BRACED funding for Chad and Sudan with the aim of expanding on the CRAM programme in eastern Chad and into Sudan, both in terms of beneficiary groups and techniques and practices (2015 – 2017).</p>

#### SECTION 4: REFERENCE/ILLUSTRATIONS

---

Please provide references for documentation (e.g. reports, surveys, etc.).	<p>Peter Gubbels (2012) Improved Community Resilience to Chronic Food Insecurity and Food / Nutrition Crises in the Horn of Africa and the Sahel: Literature Review for Concern Worldwide.</p> <p>Concern’s Contextual Analysis in Sila Region</p> <p>Concern Chad Annual Report 2013</p>
--	---

If some pictures or charts or schemes have been produced to illustrate the project/program/initiative, please join the most representative illustrations to this template.